

United States  
Department of  
Agriculture



Federal Crop  
Insurance  
Corporation



Risk Management  
Agency



Product Analysis  
and Accounting  
Division

APPENDIX III

# **RISK MANAGEMENT AGENCY POLICY ACCEPTANCE & STORAGE SYSTEM**

## **2011 REINSURANCE YEAR**

## **RISK MANAGEMENT AGENCY**

**KANSAS CITY, MO**

<b>TITLE: RISK MANAGEMENT AGENCY POLICY ACCEPTANCE AND STORAGE SYSTEM</b>	<b>NUMBER: APPENDIX III TO THE STANDARD REINSURANCE AGREEMENT</b>
<b>EFFECTIVE DATE: July 1, 2010</b>	<b>ISSUE DATE: July 1, 2010</b>
<b>SUBJECT:</b>  <b>Provides the standards, instructions and information for reporting Approved Insurance Provider (AIP) data to the Risk Management Agency/Federal Crop Insurance Corporation</b>	<b>OPI: Product Analysis and Accounting Division</b>
	<b>APPROVED: June 30, 2010</b>  <b>Deputy Administrator, Product Management</b>

### **Reason for Issuance**

This handbook is being issued to provide standards, instructions and information for electronic data reporting of policyholder, commodity and other information submitted by AIPs as required by the Standard Reinsurance Agreement, Livestock Price Reinsurance Agreement or other Risk Management Agency (RMA) policy and procedures.

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## **Part 1 General Information and Responsibilities**

### **1 General Information**

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#### **A. Purpose and Objective**

This handbook provides standards, procedure and instructions for reporting AIP data to RMA/FCIC. The objectives include, but are not limited to:

- providing a means of validating data to provide reasonable assurance that reimbursements are made based on accurate and timely information.
- maintaining detailed contract information at RMA
- enhancing the quality and availability of data at all levels

#### **B. Source of Authority**

Federal programs enacted by Congress and the regulations and policies developed by RMA, USDA and other Federal agencies provide the:

- Authority for program and administrative operations
- Origin for RMA calculation of A&O subsidy, reinsurance and risk sharing.

Authority for managing the Policy Acceptance and Storage System is authorized by:

- Standard Reinsurance Agreement (SRA) and supporting Appendices
- Livestock Price Reinsurance Agreement (LPRA)
- RMA issued procedures
- regulations:
  - Federal Crop Insurance Act
  - System of Records Notice
  - Basic provisions and endorsements
  - Debt Collection and Improvement Act



**C. Related Handbooks and Reference Materials**

This table references related handbooks/reference materials and their relation/purpose.

<b>Related Handbooks/ Reference Material</b>	<b>Relation/Purpose</b>
Appendix II to the SRA	Provides cession limits, maximum premium volume, states in which the company is authorized to write business, and other selected criteria required by the SRA .
Appendix IV to the SRA	Provides requirements for monitoring the quality control program
Crop Insurance Handbook	Provides procedures for reporting information from producers
Standards Handbook	Provides standard forms and procedures for collecting information from producers
Loss Adjustment Standards Handbook	Provides collection and reporting procedures for claim information
Written Agreement Handbook	Provides procedures for modifying terms and conditions of the ADM or other issued policy and procedure
Ineligible Handbook	Provides procedures for identification and tracking of ineligible producers

**D. Issuances and Revisions**

1. This appendix will be issued annually reflecting reporting requirements for detailed eligible crop insurance contract data applicable to each Reinsurance Year in accordance with the SRA. A DRAFT will be issued by May 31 preceding the reinsurance year for comment, including General PASS requirements, major processing enhancements, fund designation requirements and LRR or LFA determination process. Appendix III will be issued by June 30, preceding the reinsurance year, and will be approved quarterly, as needed.
2. Revisions to this appendix and to PASS may become necessary after the annual release to ensure that data reported complies with the SRA, actuarial requirements, Federal regulations, crop policy provisions, and procedural changes that could not be anticipated when the annual update was released. Revisions to Appendix III will include:
  - a. Clarifications that do not change the format or values of the reporting requirements,
  - b. New reporting requirements to meet the terms and conditions of the Act, FCIC regulations, and/or procedures enacted after the initial release of Appendix III
  - c. Corrections to the reporting requirements to meet the existing terms and conditions of the Act, FCIC regulations, and/or procedures.
3. Any new or proposed revisions will be available for comment for a period of 14 calendar days. RMA generally will work with the AIPs in an attempt to reach consensus in determining the most efficient means of implementing revisions both prior to and subsequent to the initial release. Revisions after the initial release will be highlighted and a summary by date will be maintained.

4. The SRA, Act, regulations in 7 C.F.R. Chapter IV, and the applicable eligible crop insurance contract and procedures take precedence over Appendix III for servicing requirements.
5. The appendix is maintained electronically via the RMA Home Page. The RMA Website address is:

<http://www.rma.usda.gov/data>

Click on APPENDIX III, Data Reporting Requirements.

6. Provisions for approved and draft versions of the Appendix III for multiple reinsurance years are available.
  - a. The approved version contains the current Appendix III that has been approved by RMA.
  - b. The draft version contains proposed changes for review and comment.
    - A. Draft versions will be watermarked DRAFT and changes will be highlighted when possible.
    - B. AIPs will be notified of changes to the DRAFT version on the PASS Status Report and/or on the “Read me” page.

## 2 **Responsibilities**

The following table references the Entity, Function and Responsibilities related to submitting and processing data through PASS.

Entity	Function	Responsibilities
RMA	Waivers & Revisions	Responsible for ensuring the AIP has met all their responsibilities, and approval or disapproval when requesting waiver of: <ul style="list-style-type: none"> <li>• fund designation lockdown dates/modifications to fund designations</li> <li>• A&amp;O subsidy reductions for LRR</li> <li>• A&amp;O subsidy reductions for LFA</li> <li>• revision to MAX Yields</li> </ul>
RMA	Reporting	Responsible for: <ul style="list-style-type: none"> <li>• providing updates to FCIC reporting guidelines</li> <li>• performing duties and validations of AIP submitted data as outlined in the “Formats/Edits” portion of this Handbook</li> <li>• determining data reporting requirements, validation edits, files and standards</li> <li>• maintaining and administering databases and other storage media used by PASS</li> <li>• preparing and providing error reports to the AIP designee containing data not passing all edits and validations specified by FCIC</li> </ul>

		<ul style="list-style-type: none"> <li>• updating/maintaining reinsurance data in the policy and accounting databases</li> <li>• providing technical assistance in error resolution</li> <li>• responding within 7 business days to a properly completed PASS error report</li> <li>• generating reconciliation reports/data</li> <li>• generating accounting reports/data</li> <li>• processing premium due report data upon receipt of the certified report/worksheet when received by the due date for monthly reporting</li> <li>• generating revised monthly operations reports after current worksheets are updated by the AIP</li> </ul>
RMA	Reimbursement	<p>Responsible for reimbursement of the following in accordance with Part 3 of this Appendix:</p> <ul style="list-style-type: none"> <li>• losses</li> <li>• administrative subsidies</li> <li>• gain sharing</li> <li>• interest</li> </ul>
AIP	Reporting	<p>Responsible for taking actions to ensure timely and accurate data submission to FCIC, including but not limited to submission of:</p> <ul style="list-style-type: none"> <li>• accurate and detailed eligible crop insurance contract data and other supporting information (e.g., CIMS, COI, Agency/Company employee, etc.) to FCIC in the prescribed format</li> <li>• information certifying review of MAX yield data to support change requests</li> <li>• properly completed PASS error reports to DQS, after analysis or for guidance in correcting rejected data that is present on the PASS error listing</li> <li>• data corrections to resolve reconciliation report differences</li> <li>• electronic loss data for escrow funding</li> <li>• certified hard copy monthly/annual operations reports (recap and worksheets), and all other supporting reports (e.g., premium due worksheets) by reinsurance year</li> <li>• producer premium payment information by the accounting cut-off date for the calendar month after collection</li> </ul>

### 3 System Overview

#### A. PASS Overview

1. PASS and RAS are two integrated data processing systems. PASS receives and validates transmitted data. Data validated by PASS is loaded to RMA databases. Together they provide RMA with a mechanism to provide reasonable assurance that data received is accurate, that errors are corrected timely, that information contained on Monthly Operations Reports certified by the AIP are accurate for the validated data, and appropriate accounting entries are made in RMA's Financial Accounting Systems. An overview of these two systems follows.

- a. Data supplied to FCIC for an AIP is processed through PASS. The data is checked for proper reinsurance year format. All transmitted data that is accepted will replace previously accepted data on a policy level.
- b. All transactions are validated for data accuracy and compliance with policy, procedure and processing requirements. The PASS performs required edits on each transaction to the extent practical before rejecting a transaction. Upon completion of editing, a report is generated which summarizes the acceptance, rejection and suspension by record type and liability, premium and indemnity amounts from the transaction. Records which were found in error are system-generated output that is sent to an AIP after each edit completes.
- c. Error processing is the validation that occurs from the record submission process and provides the AIPs a way to track and resolve errors that occur both within the file submission process and within the records submitted.
- d. As part of the PASS/RAS operations, an AIP will be required to reconcile data contained within their systems with data submitted and accepted by RMA. As a means of assisting the AIPs in reconciling their systems with PASS, RMA will return both AIP and RMA calculated values in rejected and accepted records for each batch submitted.
- e. The DQS provides operation support for the PASS and eDAS systems. All questions regarding data distribution reporting, and validation should be addressed to the AIP's DQS representative.

See **Exhibit 97** for a chart displaying the flow of data from AIPs to RMA

## **B. eDAS Overview**

1. eDAS is a real time system operating in a web environment designed to edit transmitted data from AIPs. AIPs will send data in Extensible Markup Language (XML) format to be processed by eDAS or use RMA's web application to input required information to eDAS. After performing a series of edits on the data, an SML transmission with all input data received from the AIP and output data defined by RMA will be sent back to the AIP in the same order they are processed. The transmission will also notify the AIP of its acceptance or rejection, and if rejected, errors will be included in the return transmission.
2. eDAS will perform a series of edits on the current data. The type of data and edits performed will be outlined later in Appendix III. Edits are done in a series of steps. If any step fails, no other edits beyond the current step will be done.
  - a. First, basic edits are done. Some of these edits include a required check, optional check, numeric check, alphabetic check and validity of codes check.
  - b. Next, conditional rules apply. These rules apply to Appendix III tags that will only be present based on the value of other Appendix III tags.

- c. Advanced rules include ADM cross reference checks and inter-field comparisons. If needed for the current Appendix III section, the corporate calculation modules are run to determine premium or indemnity.
- d. Calculation validation edits are performed to determine if the AIPs calculated values match RMA's calculated values.
- e. Post processing Rules are performed as the final step, and include checking the Underwriting Capacity Manager (UCM)
- f. RAS will be used to generate accounting reports containing AIP data processed by eDAS. Data will be taken directly from the database to feed RAS.

**4-10 (Reserved)**

## Part 2 Organizational and Formatting Standards

### 11 PASS Submission Requirements

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#### A. PASS Submission

1. Monthly submission of data is mandatory through annual settlement if any activity occurred during the month. All data submitted will be processed through PASS as soon as possible. Occasionally, the system will be unavailable during normal operation hours due to scheduled or emergency maintenance. Companies will be notified as soon as possible in these cases. Transmission files between 2 and 1,000,000 records will be automatically processed during operations hours Monday through Friday. Operation hours for all reinsurance years are Monday 6:00 a.m. to 11:00 p.m., Tuesday through Thursday, 6:00 a.m. to 2:00 a.m. and Friday 6:00 a.m. to 8:00 p.m. Any transmission received after cutoff or a file that is too large to be completed during the operation hours will be processed in the next operation period.
  - a. "Transaction cutoff date" for weekly data reporting is 8:00 p.m. central time on Friday of each calendar week as shown in **exhibit 160, Weekly Transaction Cutoff Dates**. A calendar week begins with Sunday and ends with Saturday. Any date that falls on a Saturday will use the preceding Friday as the transaction cutoff day.
  - b. "Transaction cutoff date" for monthly data reporting is 8:00 p.m. central time on Friday after the first Sunday of the month.
  - c. RMA may deviate from submission reporting requirements when necessary to ensure accurate and timely data processing. Deviations from stated reporting requirements may occur only in cases of material monetary discrepancies created by the processing of inaccurate or untimely data.
2. Companies must contact RMA prior to submitting transmission files over 1,000,000 records. RMA will schedule these files to be processed based on the availability of the operating system. This is required for validation purposes and to allow time for correction and resubmission of rejected transactions to FCIC before the monthly cutoff date for processing.
3. In order to correctly process files delivered by the AIPs to the FTP server, the file structure must submit the 2 digit AIP Code, 4 digit reinsurance year, and 1 digit application code. For example:

AIP Code	XX
Reinsurance Year	2011
Application Code	3
<b>Submit File Format</b>	<b>XX20113.ZIP</b>

The file formatting rule applies only to the file submitted to the FTP server. Each ZIP file must contain only one file within it. There are no format rules for the name of the file contained within the ZIP file. All data must be pipe-delimited, with no extra pipe at the end of the line. All fields requiring a sign (+/-) will be noted with a leading "S" in the "Format" column. This sign will be included in the Maximum Length field. Example: S9999.99

4. All files are immediately date/time stamped when they land on the FTP server. Once an AIP submits a file to the individual “Upload” folder the FTP service performs the following checks:

<b>Check # 1 - FILE SUBMISSION CHECKS</b>	
ZIP File Validity Check	If corrupt and cannot be opened, it is moved to the common upload folder with a dot-BADZIP extension
More Than One File inside ZIP	File is moved to the common upload folder with a dot-BADZIP extension.
File Name Match with User ID	If the name is not the same as the AIP indicated in the user id that submitted the file, the file is moved to the common upload folder and the name of the file is modified to indicate that the file is invalid with a dot-BADAIP extension.
<b>Check #2 - SYSTEM LEVEL ERROR CHECKS</b>	
SQL Server Folder Not Available	FTP Server service will leave the file(s) in the staging folder. When the SQL server becomes available, the files are copied
File size on SQL Server does not match the FTP server	FTP Transfer Service will attempt to copy the file again. If it still does not match, an error is logged to the file system and an e-mail is sent to the support team. The FTP Transfer Service will suspend all further copying until the issue is resolved.
<b>RETURN ZIP FILES TO COMMON DOWNLOAD FOLDER</b>	
[AIPCODE][REINSURANCEYEAR] [APPLICATIONCODE][BATCHNUMBER]. ZIP	XX2011P0003.zip
Original Text File Return Name	Appended output fields and a filename of [AIPCODE][REINSURANCEYEAR][APPLICATIONCODE][BATCHNUMBER].TXT
Unknown Record Text File Return Name	XX2011P3Unknown.txt
Exception Record Text File Name	XX2011P3Exception.txt
Unknown Record Contents (P98Z)	Contains errors in which validation could not occur due to the error.
Unknown Reason Code 1	Reinsurance Year does not match the Reinsurance Year on the batch file name
Unknown Reason Code 2	AIP Code does not match the AIP Code on the batch file name
Unknown Reason Code 3	Record Type not in list of accepted Record Type Codes (by Reinsurance Year)
Unknown Reason Code 4	Record has the wrong number of delimiters for the Record Type
Unknown Reason Code 5	Record is missing pipe delimiters
	One or more record columns exceed allowable maximum width. The P98Z exception record contains a field called “OverflowColumns” that contains the index of all fields in the input record that were too large to fit into their associated staging table. The index is 1-based, and

	indicates the position in the current row where the field was too large. If it has more than 1m rows or any single row is greater than 500 characters, it is considered a malformed file and the entire batch is dumped. The zip file will contain a single P98Z record which will have the name of the submitted file as it exists in the AIPs upload folder. If the number of records exceeds the maximum allowed the file is considered malformed and the Malformed Batch code contains a malformed file, "M". If any single row exceeds the maximum allowed length the batch is considered malformed and the Malformed Batch Code contains a Malformed Row, "R".
Unknown Reason Code 6	
Unknown Reason Code 7	Record type outside of valid submission startdate/enddate.
Exception Record (P99Z)	Contains errors in which validators using requirements defined in the Appendix III resulted in the capture of errors within the record and at the record level
<b>Exception Record Process Result Codes identifying the status of the processing for that record. When record level rules are validated, the field name and number will be left blank and the Rule ID will contain the number of the record level error that has occurred.</b>	
A	Accepted
K	Rejected, but with an established LRR, LFA or Escrow Fund recorded as appropriate
M	Message
R	Rejected
W	Warning
<b>System Level Error Handling within the CCAVE process includes the following scenarios.</b>	
Validators encounter an error and cannot generate the SQL statement	An event is logged to the file system and an e-mail is sent to the support team. The validation process is then aborted for that batch and processing of new batches is suspended for all AIPs.
SQL statement generated by the validators causes an error when run against the database server.	An event is logged to the file system and an e-mail is sent to support team. The validation process is aborted for that batch and processing of new batches is suspended for the AIP and Reinsurance Year associated with the error.
CRDS will capture individual unknown rows	Max length of an individual row is 5,000 where an individual row exceeds 5,000 ch it becomes a malformed batch
CRDS will log file index information on malformed batches	It will not capture the submitted data

5. Upon successfully passing all edits, accepted data will be included in the Monthly Operations Reports generated by RAS. Failure of data to pass all reporting and edit requirements in this Appendix may result in such data not being accepted for payment on the Monthly Operations and Annual Operations Reports. Data must be electronically transmitted successfully and completely



received by the transaction cutoff date to be included in that week's transactions. Monthly Operations Reports will be prepared based on data received and accepted by the transaction cutoff date for monthly reporting.

6. Data must be submitted on a reinsurance year basis. The 2011 Reinsurance Year data would include the following crop year data:
  - a. 2011 Avocados
  - b. 2010 Raisins
  - c. 2012 Citrus (Arizona, California, Florida and Texas)
  - d. 2012 Florida Fruit Trees
  - e. 2012 Nursery
  - f. 2011 Texas Citrus Trees and all other crops
7. All data relating to each respective Reinsurance Year must be included in the same submission, with separate submissions required for each reinsurance year.
8. The amount of premium submitted by the AIP cannot exceed the maximum premium limitation approved by RSD. With each PASS edit, AIPs will receive the Year-to-Date accepted totals on the .sum report. This report notifies the AIP of the summary statistics, including premium accepted as of the report date. When the percentage has reached 100% of maximum premium limitation approved by RSD, RMA will determine whether subsequent processing will be suspended. Accounting reports will be generated based on data received prior to any suspension.
9. Eligible crop insurance contracts may be accepted any time up to the February cutoff date following the reinsurance year. Thereafter, policies will be rejected if they are originally submitted after the February cutoff date. If a situation arises that causes the AIP to be unable to meet this cutoff, justification may be submitted to the DQS representative for RMA review to determine if a waiver is appropriate.
10. Fund Designation
  - a. AIPs may designate eligible crop insurance contracts with an accepted Type 9 record to the Residual Fund by the fund designation cutoff date. AIPs may transfer eligible crop insurance contracts from the Residual Fund to the Commercial Fund by the fund cutoff date. Designations to the Commercial Fund may be made via the Type 9 record. If a Type 9 record is not accepted by the fund designation cutoff date for an eligible crop insurance contract, it will be designated as Commercial. Fund designation cutoff dates will be determined for eligible crop insurance contracts as follows:
    - i. For an eligible crop insurance contract associated with an agricultural commodity with a fixed sales closing date, (including those with multi-year Written Agreements after the initial year), the Type 9 record must be accepted by PASS by the weekly cutoff date for the week including the 30<sup>th</sup> calendar day after the sales closing date.

- ii. For eligible crop insurance contracts with extended sales periods (i.e., sales are permitted beyond the sales closing date shown in the special provisions), the transaction cutoff dates for the designation of policies to the Residual funds are:
  - 1. For new policies, the later of the transaction cutoff date for the week containing the 30<sup>th</sup> calendar day after the eligible producer signature date or the transaction cutoff date for the week containing the 30<sup>th</sup> calendar day after the sales closing date.
  - 2. For carryover policies, the transaction cutoff date for the week containing the 30<sup>th</sup> calendar day after the sales closing date.
- iii. For written agreements requiring annual FCIC approval or for the initial year of an eligible crop insurance contract associated with a written agreement only, (excluding Written Agreement types GP, HR, NL, SP, UA), the Type 9 record must be accepted by PASS by the weekly cutoff date for the week including the 30<sup>th</sup> calendar day after the RMA written agreement approval date (Print Date.)
- iv. For AGR-Lite the sales closing date of 3/15 will be used for new insureds. For Carryover AGR-Lite insureds the cancellation date of 1/31 will be used. For AGR, the sales closing date of 1/31 will be used for all insureds. The Fund must be accepted by eDAS by the weekly cutoff date for the week including the 30<sup>th</sup> calendar day after the applicable date.
- v. If the actuarial documents or ADM have more than one sales closing date for the eligible crop insurance contract, the earliest SCD will be used to determine the fund designation cutoff date, unless the type or practice is reported to indicate the specific SCD.
  - 1. For crops in counties with both Fall and Spring Sales Closing Dates, if the fall crop is not planted and a zero acreage record is accepted for the fall crop, the fund designation for the spring crop may be changed up to the fund designation cutoff date for the spring crop.
- vi. If an “Added-county” block is used on applications and/or contract change forms in accordance with the Document Standards and Crop Insurance Handbooks, they may timely indicate the primary (designated) county for fund designation by entering the appropriate field value in the multi-added-county flag field for the location state, policy number, crop year and crop code. The primary county for fund designation does not have to match the primary county used for the additional county provisions on the “insurance in force” record (Type 14.)
  - 1. Subsequent counties established under the “Added-county” procedure and transmitted to RMA after the fund designation deadlines, must be placed in the same fund as the primary (designated) county. Subsequent counties are indicated by placing the appropriate value in the Added-county flag field.

2. Only category B crops (excluding Forage Production) qualify for added-county.
  3. Subsequent counties can be added after Fund designation cutoff if an insured does not have an interest in any other crop in the added county.
  4. Companies must also identify the primary (designated) county policy key (location state/county, AIP number, policy number, crop year, crop code and type code) in the added-county reference policy key fields.
- vii. High Risk Ground may be excluded from a revenue plan of insurance and insured under a yield based plan of insurance. The fund designation for high risk ground may be different than the primary/revenue plan fund designation.
  - viii. When RMA approves alternate crops, the Type 9 record must be accepted by PASS by the weekly cutoff date for the week including the 60<sup>th</sup> calendar date after the RMA approval date.
- b. AIPs are to notify their DQS representative immediately of any problems or issues that may impact previously accepted eligible crop insurance contract data or which prevents timely acceptance of data.
  - c. Livestock price insurance contracts accepted by the UCM must be designated to the Private Market Fund within two Federal workdays of the acceptance date of the contract by FCIC.

#### 11. Determination of LRR Transaction Cutoff Date

- a. The ADM 3, Dates Record contains a modified Sales Closing Date to accommodate sales closing dates falling on a non-business day. It also contains an Extended Sales Closing Date if RMA extends a sales period. If there is not a modification or extension, all three date fields will contain the same date. PASS uses the Extended Sales Closing Date to calculate LRR and fund cutoff dates (this would be the latest possible date.)
  - i. The Type 10 and 14 records identify data elements required for timely reporting of an eligible crop insurance contract. The late change date field will reflect the date of the batch where one or more of these elements were changed. If the company resubmits the 14 record back to the lockdown coverage level, price election and market price indicator, PASS will reverse the reduction to the lockdown reduction percentage.
- b. The LRR transaction cutoff date will be determined for eligible crop insurance contracts meeting the following conditions:
  - i. For eligible crop insurance contracts with a fixed sales closing date, the LRR transaction cutoff date will be the weekly cutoff date containing the 30<sup>th</sup> day after the sales closing date.

- ii. For eligible crop insurance contracts not having a fixed sales closing date, the LRR transaction cutoff date will be:
  1. For the initial year of coverage, the later of the weekly cutoff containing the 30<sup>th</sup> day after the producers signature date from the application, as transmitted and accepted on the Type 14 record, or the weekly cutoff containing the 30<sup>th</sup> calendar day after the cancellation date.
  2. For subsequent years, the weekly cutoff containing the 30<sup>th</sup> day after the cancellation date.
- iii. For the initial year of an approved RMA written agreement issued for an eligible crop insurance contract or for any written agreement that must be renewed or approved annually, except those listed in 11.b.iii.1., above, the LRR transaction cutoff date will be the weekly cutoff containing the 30<sup>th</sup> calendar day after the RMA Written Agreement Approval Date.

1. RMA approved written agreements excluded from LRR cutoff determination under **Section 3**

High Rate Area	(HR)
Acreage not harvested or planted in prev. year	(NB)
Listing Reconsideration for Tobacco 2005	(TL)
Small Grains Interplanted	(SG)
Seed Potato acreage > 12%	(SP)
Written Unit Agreements	(UA)
Unrated Land	(UC)

iv. Additional County Application

If the eligible crop insurance contract was sold under the additional county provision, any subsequent counties will be accepted with the same LRR determination as the designated primary county contract.

v. Multiple Sales Closing Dates

If the eligible crop insurance contract has more than one sales closing date for the eligible crop insurance contract, the earliest SCD will be used to determine the LRR transaction cutoff date, unless the type or practice is reported to indicate the specific SCD.

vi. Successor-in-Interest

For successor-in-interest changes to a policy between sales closing date and date insurance attaches to prevent LRR determination, additional data must be accepted by PASS. After insurance attaches successor-in-interest is not applicable for reporting until the subsequent crop year.

## 12. Determination of LFA

- a. The A&O subsidy applicable to the eligible crop insurance contract will be reduced when acreage records are accepted in PASS for the first time after the transaction cutoff date for the sixth (6<sup>th</sup>) full week after the week which includes the latest acreage reporting date as specified in the ADM file for the crop, county and plan code within the same Fall/Spring seed cycle designation. The PASS will compare the processing date of accepted acreage reporting date to the final acreage reporting date shown on the ADM for each crop within a policy except as noted below:
  - i. If a policy has multiple crops in a county, the latest acreage reporting date will be used to determine the weeks late for all crops established with a 14 record in the county. This only applies to the crops with the same Fall/Spring seed cycle designation. Crops with the latest acreage reporting date for the crop, county and plan code of February 1 of the reinsurance year are considered Fall. Crops with all other acreage reporting dates will be considered Spring. If the acreage is not accepted by the 6<sup>th</sup> week after the acreage reporting deadline, the expense reimbursement for eligible crop insurance contracts will be reduced by percentages shown on the LFA reduction chart in Section 21.C., Accounting Processing Considerations. Refer to **Exhibit 11-8** for written agreement LFA determination.
  - ii. For AGR and AGRLite, the expense reimbursement will be reduced on AGR contracts in cases that the Annual Farm Report is accepted in PASS after the transaction cutoff date for the 6<sup>th</sup> full week after the week which includes the sales closing date as specified in the ADM file for the crop, county and plan code. The expense reimbursement for eligible AGR and AGRLite insurance contracts will be reduced by the percentage shown on the LFA reduction chart.
  - iii. Crops with a single sales closing date with multiple planting periods that extend from fall to spring will be considered Spring Seed cycle codes and use the latest acreage reporting date for late filed acreage determinations. The expense reduction will be reduced when the acreage records reported to PASS are accepted after the transaction cutoff date for 6th full week after the week which includes the latest acreage reporting date.
  - iv. For Nursery (0073) and Florida Fruit Trees (0207 through 0214) the expense reimbursement will be reduced when the acreage/inventory records reported to PASS are accepted after the transaction cutoff date for the 6<sup>th</sup> full week after the week that includes either:
    1. The signature date for new policies from the corresponding accepted Type 14 record for the crop and county, or
    2. The sales closing date for carryover policies.

See Nursery and Florida Fruit Tree A&O Reduction/Fund Designation cutoff table in **Exhibit X**

## B. eDAS Submission

1. Data will be processed through eDAS in real time. eDAS will be operational 24 hours a day and 7 days a week for certain Appendix III sections with exceptions for maintenance. Appendix III sections available in the operational hours listed above, are Agent, Entity, SBI, Policy, Fund, Crop Policy, Adjuster (if applicable), and Reviewer (if applicable). The insurance plan will determine the availability of eDAS for the Premium and Indemnity sections. For example, the Livestock Risk Protection plan will fail any premium or indemnity records sent during certain hours of the day due to ADM data unavailability. If maintenance is required, eDAS will be temporarily shut down, fixes will be migrated into eDAS, and eDAS will be turned on again. eDAS will be unavailable for processing data daily from 12:00 p.m. to 1:00 a.m. for daily maintenance. If at this time eDAS is in the middle of processing data, the data not processed will be rejected.
2. eDAS requires the transmission of Appendix III sections in a certain order. This order by section is as follows:
  - a. Agent,
  - b. Entity,
  - c. SBI,
  - d. Policy,
  - e. Fund (AGR/AGR-L),
  - f. Crop Policy,
  - g. Reviewer (if applicable)
  - h. Premium,
  - i. Fund (Livestock), and
  - j. Indemnity
  - i. If data is sent out of order, eDAS will send an error back to the AIP in its XML output for the current transaction. For example, Crop Policy data with an Agent ID code must have an accepted Agent section for that Agent ID code.
3. eDAS does not require the bundling of an entire set of sections for a policy. For example, once the Agent data has been accepted by eDAS, it never will have to be sent to eDAS again unless the AIP wishes to update it. Agent data is not required each time Policy or Premium data is sent. This also applies to the SBI data. For example, if five SBI records are required for the Entity, one may be sent today while two more may be sent next week and the remaining two may be sent in two months from now.
4. AIPs will indicate the type of transaction currently being sent to eDAS using the Appendix III fields process flag and change flag.
  - a. Process Flag indicates whether the transaction is an original, a modification, a deletion, a validation, a quote, a retrieval, cancel or re-instate as defined below.

Transaction Type	Function
Original	First Time Entry. All edits will apply
	Update to an existing record. Key fields and the updated values

Modification	are required. All other fields will be ignored.
Deletion	Marks the currently accepted record as removed. Key fields will be required for the delete. All other fields will be ignored.
Validation	Will not consider the current transaction as real, but only as a test. All Appendix III edits will apply and errors will be returned to the AIP.
Quote	Only performed on sections associated with corporate calculation modules. Only values necessary to perform the quote will be required as input. A quote will not be treated as a real transaction but will return errors on required fields and corporate calculation results to the AIP.
Retrieval	Indicates an AIP is requesting the information.
Cancel	Indicates an AIP is requesting the information to be canceled. Not applicable for AGR/AGR-L.
Reinstate	Indicates an AIP is requesting the information be reinstated (reverse the use of cancel (flag 8)). Not applicable for AGR/AGR-L.

- b. Change flag of 1, 2 or 3 required on an update transaction only and indicates the level of change authority associated with the record. Only fields with a level of change less than or equal to the change flag may be modified. For a Change Flag of 3, the AIP must submit a request to RSD for approval.
  - i. Only the latest eDAS transactions will be stored in the eDAS database. Input and output data will be stored when an original, update, delete, or cancel takes place. Each of these transactions will also be kept on the web server for a period of time for companies to download. Once an original update, delete, or cancel passes all edits and therefore was accepted by eDAS, it will be copied to the policy database. This will be done frequently during the day.
  - ii. Quote or validation transactions will not be stored in the eDAS database or written to the Web server.

## 5. eDAS Retrieval Process

- a. There are two ways of retrieving data that has been posted to eDAS:
  - i. Process Flag 7 – **preferred method for reconciling data between eDAS and other systems, since it returns only what has been accepted directly from the eDAS database, and is therefore, much faster than Transaction Retrieval.**
    - 1. Submit a transaction to eDAS with no more than one of each of the records that are desired. On each record, set the process flag to 7. This instructs eDAS to look for the record in the database, and return records that match the criteria sent in. As much or as little of the record may be sent in, depending on how specific the request is. The only required fields are:
      - a. insurance\_provider,

- b. reinsurance\_year,
- c. insurance\_plan\_cd (where applicable).

ii. Transaction Retrieval

1. Request a range of actual transactions submitted to eDAS. This method reads the transactions off of the disk, and is slower than using the Process Flag 7. Following is a description of the retrieval processes, as well as parameters that may be used to determine what should be returned.

AGR/AGR Lite and Livestock (2005 and subsequent)

<b>HTML POST/GET</b>	<a href="https://online-livestock.rma.usda.gov/apps/edas_service/retrieve.aspx">https://online-livestock.rma.usda.gov/apps/edas_service/retrieve.aspx</a>
Filtering Parameters	<p>start_dt (format mm/dd/yyyy)</p> <p>end_dt (format mm/dd/yyyy)</p> <p>start_tm (format hh:mm:ss 24 hour clock)</p> <p>end_tm (format hh:mm:ss 24 hour clock)</p> <p>section_name (comma delimited list of sections desired)</p> <p>start_trans_num (Transaction Sequence Number of first section to be returned)</p> <p>end_trans_num (Transaction Sequence Number of last section to be returned)</p> <p>accepted_rejected (Comma delimited list of character strings.)</p> <p>Values may be A for accepted only, R for rejected only, and B for both accepted and rejected.</p> <p>section_required (Comma delimited list of character strings.)</p> <p>Values may be Y, section required, or N meaning section not required</p> <p>process_type (string that can be either “actual”, “validate” or “all”)</p> <p>Designates what type of process flags to return.</p> <p>Include_warnings (string that can be either yes (Y) or no (N))</p> <p>Use Y to return XML with warnings, N to exclude XML with warnings.</p>
Search Parameters (returns transactions submitted in the last 90 days matching the following criteria)	
transaction_method	Method by which transaction was submitted to eDAS. Valid values are webservice, webapp or blank.
reinsurance_year	Reinsurance year of the records desired
company	Company listed on the policies related to the records desired
insurance_plan_cd	Insurance plan listed on the crop policies related to the records desired.
policy_number	Policy number of policies related to the records desired.
id_number	ID number of entity or SBI listed on policies related to the records desired
location_state	State listed on policies related to the records desired
location_county	County listed on policies related to the records desired.



agent_ssn	Agent SSN listed on crop policies and premiums related to the records desired.
<p>Example:  <a href="https://online_livestock.rma.usda.gov/apps/edas_service/retrieve.aspx?start_dt=10/01/2010&amp;end_dt=10/05/2010&amp;section_name=agent,policy,crop_policy&amp;transaction_method=webapp&amp;reinsurance_year=2011&amp;accepted_rejected-A,A,A&amp;section_required=Y,Y,Y&amp;process_type=actual">https://online_livestock.rma.usda.gov/apps/edas_service/retrieve.aspx?start_dt=10/01/2010&amp;end_dt=10/05/2010&amp;section_name=agent,policy,crop_policy&amp;transaction_method=webapp&amp;reinsurance_year=2011&amp;accepted_rejected-A,A,A&amp;section_required=Y,Y,Y&amp;process_type=actual</a> and include_warnings = Y</p> <p>Will return accepted Agents and Policies with or without warnings from 10/01/2010 through 10/05/2010, where the records were submitted using the web application and the reinsurance year was 2011. Additionally, only policies with at least one accepted crop policy record will be returned. This search will not return any validate only records (process_flag of 4&amp;5).</p>	
<b>SOAP</b>	<a href="https://online_livestock.rma.usda.gov/apps/edas_service/main.asmx">https://online_livestock.rma.usda.gov/apps/edas_service/main.asmx</a>
Retrieve transactions from any date, using the following method. Transaction getTransaction(DateTime startDateTime, DateTime endDateTim, int startTransNum, int endTransNum, int startRecNum, int endRecNum, string[] sectionName, string processType)	
startDateTime	A DateTime object representing the start date and time that you want to retrieve.
endDateTime	A DateTime object representing the end date and time that you want to retrieve.
startTransNum	An Integer that represents the first trans_sequence_num you want to retrieve. 0 for all.
endTransNum	An Integer that represents the last trans_sequence_num you want to retrieve. 0 for all.
startRecNum	An Integer that represents the first record umber you want to retrieve. 0 for all.
endRecNum	An Integer that represents the last record number you want to retrieve. 0 for all.
sectionName	An Array of strings representing the sections you want to retrieve.
processType	A String representing what process flags to return. "All" to return validates and actual records.
To search transactions within the last 90 days, use the following method. Transaction getTransaction(DateTime startDateTime, DateTime endDateTime, int startTransNum, int endTransNum, int startRecNum, int endRecNum, string[] sectionName, string[] acceptedRejected, string[] sectionRequired, string transactionMethod, string processType, int reinsuranceYear, int insurancePlanCd, int company, int locationState, int locationCounty, int idNumber, int policyNumber, int agentSSN)	
startDateTime	A DateTime object representing the start date and time that you want to retrieve
endDateTime	A DateTime object representing the end date and time that you want to retrieve
startTransNum	An Integer that represents the first trans_sequence_num you want to retrieve. 0 for all
endTransNum	An Integer that represents the last trans_sequence_num you want to retrieve. 0 for all.
startRecNum	An Integer that represents the first record number you want to retrieve. 0 for all
endRecNum	An Integer that represents the last record number you want to retrieve. 0 for all
sectionName	An Array of strings representing the sections you want to retrieve
acceptedRejected	An Array of characters representing whether sections in section name must be A – accepted, or R – rejected. "B" for both.
sectionRequired	An Array of characters. Y meaning required, N meaning not required. Default is N.

transactionMethod	A string indicating the method by which the transactions desired were submitted to eDAS. Valid values are webservice, webapp or blank.
processType	A string indicating what process flags to return. "Validate for validate only records, "actual" for actual records, or "all" for all records. Default is actual.
reinsuranceYear	An integer indicating the reinsurance year of the records desired
insurancePlanCd	An integer indicating the Insurance Plan listed on the crop policies related to the records desired.
company	An integer indicating the company listed on the policies related to the records desired.
locationState	An integer indicating the state listed on policies related to the records desired
locationCounty	An integer indicating the county listed on policies related to the records desired
idNumber	An integer indicating the ID number of entity or SBI listed on policies related to the records desired
policyNumber	An integer indicating the Policy number of policies related to the records desired
agentSSN	An Integer indicating the Agent SSN listed on crop policies and premiums related to the records desired
includeWarnings	A Boolean indicating whether to include or exclude XML with warnings. Use "true" to include warning and "false" to exclude warnings.
Note: the second web method is an overload of getTransaction with more parameters. In the <b>SOAP</b> packet, it will be shown as searchTransaction instead of getTransaction. This will not affect Microsoft.Net developers who can continue to use getTransaction in their code.	

iii. The three web methods to allow for eDAS offline processing are described below:

sendOfflineTransaction	Allows an AIP to send XML offline. The trans_sequence_num is returned to the user
getOfflineTransactionStatus	Allows an AIP to poll eDAS using the trans_sequence_num to determine if eDAS has finished processing. A return value of "True" is returned if eDAS is finished. A return value of "False" is returned if eDAS is still processing the transaction.
getofflineTransaction	An overload of getTransaction allows an AIP to retrieve XML using the trans_sequence_num as its only input parameter.

6. Report/submit a minimum of 5% of insurance contracts and 5% of indemnified contracts reviewed. Flag contracts that are reviewed.

## C. CIMS SUBMISSION

1. Companies may request insured producer data from CIMS. Before CIMS will return any data to an AIP for a requested insurance policy, the producer's policy must have been previously accepted by RMA and loaded into the CIMS database.
2. AIPs may request CIMS information by submission of a CIMS Request, Type 05 Record. The request record will contain fields for the RMA policy key and the FSA administrative state and county (if needed) and will be used to retrieve FSA producer and/or crop acreage information.

The request will be performed by matching the RMA location state and county to the FSA location state and county. There may be cases where the request must be made based on the FSA administrative state and county. In these situations, the AIP will submit the FSA administrative state and county on the request record and the process will use these values and not the RMA location state and county. If the AIP request indicates that a statewide application exists, the returned acreage information will be based on the RMA location state matching to the FSA location state or matching to the FSA administrative state if the FSA administrative state is submitted with the request.

3. The AIP will be able to request three sets of information for an insurance policy;
  - a. producer information for the primary insureds,
  - b. producer information for primary insureds and the reported SBIs, and
  - c. acreage information for the primary insureds

## 12 Telecommunications

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### A. PASS Telecommunication Processing

1. Electronic transmission is mandatory for submission of data and dissemination of reports. Electronic transmission provides faster processing turnaround, and more automated processing of data submissions and report handling. This method of processing allows RMA to direct its resources to error resolution and AIP processing support functions.
2. RMA's Insurance Provider Server (IP Server) is a system designed to provide telecommunications services for all reinsured AIPs and associated organizations which report to RMA. In addition to this, the IP Server also supports connections to RMA's system. Each AIP is responsible for obtaining telecommunications services from any common carrier of their choosing. The IP Server supports VPN and Dial-up connections to the IP Server.
3. All AIPs will need to complete security form FCIC-586 before a connection ID can be provided. Once that ID is provided, connection details are as follows:

<b>Dial-Up</b> – Connectivity can be achieved using	ITU V.90 industry standard modem speeds up to 56 KBPS
	Modems should be configured with no parity, 8 data bits, 1 stop bit and full duplex.
<b>VPN Connections</b> – 2 Available Options	
Checkpoint Secure Client	Connection must be encrypted with the following parameters. 3DES Encryption Algorithm, SHA1, Authentication Algorithm, and Pre-Shared Secret as Authentication Mode
	Client workstations use Checkpoint client which is a free download from the Internet. RMA will provide connectivity documentation for the initial setup and

	connection. Technical support on the client's side will be the responsibility of the AIP.
Checkpoint Site to Site VPN Connection	A permanent connection to the public Internet is required
	An industry standard firewall capable of a Site to Site VPN Tunnel over the public Internet. Technical support on the client's side will be the responsibility of the AIP.

4. The IP Server can be reached at 1-800-847-3834. This is a toll free call available from anywhere in the continental United States. It currently operates forty-six (46) on ISDN-PRI (Digital) service configured as one access group. Any AIP who chooses may establish a dedicated access to the IP Server via the above mentioned Site to Site VPN connection. Those AIPs who wish to have dedicated access would be required to provide the compatible equipment as listed above. AIPs considering a dedicated connection to the IP Server should contact the System Administration Section before making any purchases.
5. Except for the maintenance periods, AIP may initiate the transmission at the AIP's discretion during operational hours. This could include multiple daily submissions.
6. RMA will retain the option to stop automatic edit processing, at its discretion. AIPs will still be allowed to continue transmitting data, although it is not immediately processed through the PASS. A temporary stop in automatic edit processing should only occur in case of a PASS processing problem, maintenance, or when the timing of edit revisions must coincide with a particular point in time of the submission cycle. In the event that automatic edit processing is stopped for more than one hour, the AIPs will be notified when processing has resumed. All submissions sent during this period will be processed separately in the order they are received.

## **B. PASS Report Handling**

All reports, error listings and operations reports will be made available to the AIP for downloading via the Web Server.

## **C. eDAS Telecommunications/Security**

1. All eDAS transactions will take place on a web server. A user id and password are required to use eDAS. These items will be given to each AIP by RMA upon request. XML data transfer will take place along a 128-bit SSL link. Performing a HTTP XML post to eDAS may be done with many languages including Perl, Java, or Windows Server Com objects XMLDOM and XMLHTTP.
2. AIP must submit a FCI-586 to RMA Security for approval. Upon approval RMA Web Team will establish a Virtual Host on the Web Server and assign a VPN account. RMA Security will assign a Web App account.
3. There are two versions of the web app, Admin and Sales. In both cases, the web app is secured by 128-bit SSL. The Sales web app is not restricted to IP address since an agent could log in from somewhere other than the AIP office. The Admin web app is secured by the AIP ID and password provided by RMA (changed every 6 months). The AIP controls the ID and password of their agents to be used for the Sales web app. Agents can log into the Sales web app using the ID and password that is submitted via the agent section. If an AIP does not provide an ID

and password for an agent, that agent will not have access to the Sales web app. For problems related to ID or password contact RMA Web Team at 816-926-7301 or via email [webteam@rma.usda.gov](mailto:webteam@rma.usda.gov).

URL'S	
<b>POST (SOAP)</b>	
Test	<a href="https://online-test.rma.usda.gov/apps/edas_service/main.aspx">https://online-test.rma.usda.gov/apps/edas_service/main.aspx</a>
Production	<a href="https://online-livestock.rma.usda.gov/apps/edas_service/main.aspx">https://online-livestock.rma.usda.gov/apps/edas_service/main.aspx</a>
<b>POST (W/O SOAP)</b>	
Test	<a href="https://online-test.rma.usda.gov/apps/edas_service/index.aspx">https://online-test.rma.usda.gov/apps/edas_service/index.aspx</a>
Production	<a href="https://online-livestock.rma.usda.gov/apps/edas_service/index.aspx">https://online-livestock.rma.usda.gov/apps/edas_service/index.aspx</a>

### 13 Processing Considerations

#### A. PASS Processing considerations

1. RMA will maintain Policy Databases which contain the current net cumulative effect of all transactions for an eligible crop insurance contract and required supporting data. An eligible crop insurance contract is identified in the policy database, based on the following fields, AIP, Location State, Policy number and Crop Year. All transmitted records accepted for a policy fully replaces all previously accepted data for the eligible crop insurance contract.
2. RMA Internal use only, Filler and Reserved record type fields will be initialized by RMA. AIP transmitted data will be replaced with appropriate default value and may be overlaid with RMA Internal values.
3. Acceptable record types and specific handling considerations for PASS are as follows:

Type 5 Record CIMS Request	Type 5 records are used to request insured producer data from CIMS. Type 5 records are not processed by PASS. For 2010, the Type 5 record will be used to retrieve approved FSA producer and/or crop acreage information from the CIMS. The Type 5 records will be transferred from the secured IP Server to the CIMS for processing. The request information, along with the original request record and status codes outlining success/failure in the process, will be placed on the IP server returned to an AIP. The AIP may then extract the CIMS information from the secured IP server.
Type 9 Record Fund Designation	Timely acceptance of the Type 9 record is required to establish the eligible crop insurance contract into either the Residual or Commercial Fund. Any eligible crop insurance contract not designated by the AIP to the Residual Fund will be designated to the Commercial Fund. If an eligible crop insurance contract was established into the Residual Fund, the policy can be timely transferred to the Commercial fund by submitting a Type 9 record before the Fund Designation transaction cutoff date for the eligible crop insurance contract. If a Type 9 record is not accepted for an eligible crop insurance contract, it will be designated as

	<p>commercial. The type code and practice code may be required for crops with more than one sales closing date to determine fund designation based on the sales closing date. Type 9 records are submitted for the eligible crop insurance contract on location state and location county basis. Once a record has been accepted it does not need to be resubmitted. RMA may accept fund designations records after the ADM Records have been released for the crop. Refer to Fund Designation Guidelines in <a href="#">Exhibit 9-1</a>.</p>
Type 10 Record, 10A, 10B Policy Records	<p>Type 10 records are used to establish a policy and provide information regarding the policyholder and entities with a SBI, Spouse, Landlord and Transfer of right to indemnity. A Type 10 record requires at least one Type 14 record to be submitted with it. The Type 10 record identifies the data elements required for the timely reporting of an eligible crop insurance contract.</p> <p>The PASS requires a Type 10 and 10A record. This is the “primary” insured, and establishes the contract within the system. If a Type 10 is not submitted, then all records for the contract will be rejected. PASS will allow a Type 10 record for each crop year covered under the policy number. All Type 10B records are considered a Spouse, SBI, Landlord or Transfer of right to indemnity entities with a SBI in the farming operations of the primary insured. 10B Other Person SBI records are required for the determination of the timely reporting of an eligible crop insurance contract. If any Type 10 record is rejected, then all records for the contract will be rejected. SBI record requirement is based on the entity type on the primary Type 10 record (See <a href="#">Exhibit 10-1</a>).</p> <p>A Type 49 Delete record will remove the policy and all records for the policy from RMA’s Databases and Duplicate files.</p>
Type 11 Record Acreage	<p>Type 11 records are used to establish premium and liability for each acreage line. The record also identifies the land location and allows reporting of common USDA information. Legal descriptions in a section that has a high risk area designation will receive a warning for partial sections and be rejected for sections completely within a high risk area designation.</p> <p>A Type 11 record will not be accepted until corresponding Type 10, Type 14, Type 15 (if required - See <a href="#">Exhibit 15-4</a>), and Type 27(if required - <a href="#">See Exhibit 27-1</a>) records have been accepted by the PASS. A Type 11 zero acreage record must be submitted for zero acres, uninsured acres, no history acres (no APH records) and units not planted, on the eligible crop insurance contract. To modify data previously accepted, all current and valid records for the policy must be resubmitted. A Type 11 record will not be accepted until after the monthly cutoff preceding the date insurance attaches for the insured commodity.</p>

<p>Type 12 Record Payment</p>	<p>Type 12 records are used to record/report payments by producers for each eligible crop insurance contract. Only one Type 12 record per payment type code will be accepted for the contract. Type 12 transactions may be removed by resubmitting all applicable records for the crop insurance contract or via the Type 49 delete record with the exception of payment type ‘02’ or ‘03’.</p> <p>When reporting CAT fee payments (either money or loss credit) using the Type 12 record, use the payment type “02”. A CAT fee receivable must exist before a CAT fee payment is accepted, and the paid amount for CAT fees cannot exceed the total receivable amount reported on the Type 65 record. The paid amount for CAT fees is cumulative. The paid date also must be greater than the debt delinquency date reported on the Type 65 record. Error conditions will occur for any of the following: duplicate Type 12 records, a paid date less than or equal to the debt delinquency date, no match to a receivable, and a paid amount with a \$0 value.</p> <p>When reporting CAT fee payment reversals using the Type 12 record, use the payment type “03”. The paid amount for reversals must equal the paid amount reported using payment type “02”. The paid date must be the same as the paid date reported on the payment type “02”.</p> <p>The “03” payment type code is the only way to reverse a CAT fee payment. Error conditions will occur for any of the following: duplicate Type 12 records, and the paid amount and/or paid date do not match the previous “02” payment. The Type 49 delete record cannot be used to remove a CAT fee payment. Only the “03” payment type can be used to remove a CAT fee payment.</p> <p>When reporting state subsidy use payment type code “04”, when applicable.</p> <p>When reporting Financial Assistance Program use payment type code “06”, when applicable.</p>
<p>Type 13 Record Inventory Value Record</p>	<p>Type 13 records are used to establish premium and insurance values for Nursery (0073) and Aquaculture (0116). A Type 13 record will not be accepted until corresponding Type 10 and Type 14 records have been accepted. In addition, a Type 13 record for Aquaculture (Clams) will not be accepted until corresponding Type 17 has been accepted. A Type 13 record will not be accepted until after the monthly cutoff preceding the date insurance attaches for the insured commodity.</p>
<p>Type 14 Record Insurance In Force Record</p>	<p>The Type 14 record establishes the crop, county, plan code and reports the eligible crop insurance contract data determined at Sales Closing. The Type 14 record identifies the data elements required for timely reporting of eligible crop insurance contracts. The type code and practice code may be required for crops with more than</p>

	one sales closing date to determine eligibility based on the sales closing date. Refer to <b>Exhibit 14-1.</b>
Type 15 Record Yield	<p>The Type 15 records are used to record/report APH yield information for designated crops.</p> <p>A warning message will be issued to companies when the yield year is less than 1970.</p> <p>If a Type 15 record(s) is rejected, the corresponding Type 11 record will be rejected.</p>
Type 20, 20A Type 21 and Type 22 Records Loss Total Loss Line Record Inventory Loss Record (Nursery & Aquaculture)	<p>The Type 21 and 22 Records establish the loss amounts for a given eligible crop insurance contract and the Type 20 Record identifies the application or disbursement of loss payments.</p> <p>AIPs must transmit denied claim records to RMA with all applicable fields recorded for any claim for indemnity inspected by a loss adjuster and denied by the AIP thus resulting in no indemnity payment.</p> <p>PASS will not automatically accept loss records if the price, coverage level, or market price indicators are accepted or modified after the notice of loss, producer signature date or loss adjuster signature date on the loss records.</p> <p>Type 20 records are linked by Claim Number to corresponding Type 21/22 records. Therefore, all Type 20 and 21/22 records for an eligible crop insurance contract from the transaction file will replace all Type 20 and 21/22 records for the eligible crop insurance contract on the Policy database.</p> <p>If a Type 20, 21 or 22 record is rejected, all Type 20, 21 and 22 records for the Claim Number will be rejected. If a Type 11 or 13 record is rejected, the corresponding Type 21/22 records for the crop are rejected, also all other Type 21/22 records for the Claim Number(s) of the rejected crop, along with all applicable Type 20 records for the Claim Numbers of the rejected Type 21/22s.</p> <p>Optional: An AIP can submit Type 20 losses with loss total code of 'D', Unfunded Escrow, to ensure records clear PASS edits before sending an 'E', Escrow Funded. All loss total codes from the Type 20 will need to be sent every time because the sum of the loss totals should equal the indemnity amount on the Type 21/22 records.</p> <p>Type 20, 21 and 22 Processing: The Type 20 record is submitted in support of the Payable element in the Type 21 or 22 record. There are multiple "buckets" which identify the breakdown of the indemnity amount:</p> <ul style="list-style-type: none"> <li>• premium on the policy for current year with the loss (M),</li> </ul>



	<ul style="list-style-type: none"> <li>• premium on another policy for current year(P),</li> <li>• administrative fees (F),</li> <li>• other (O),</li> <li>• recovery of a prior or subsequent reinsurance year premium or loss (R)</li> </ul> <p>The total of any loss application code must be greater than zero.</p> <p>One Type 21/22 record is submitted for each loss line. More than one Type 20 record may be submitted, if needed, to support the 21/22 record(s).</p> <p>If any of the "Total" fields on the Type 20 Record contain a "P", the corresponding "P/CR Memo State" and "P/CR Memo Policy Number" fields must contain the Location State and Policy Number for current year to which the "P" amount will be applied. The RAS will show the generated "P" amounts in the loss credit column of the summary report on the designated crop insurance contract.</p> <ol style="list-style-type: none"> <li>1 If part of the loss is to be applied to an eligible crop insurance contract under a different AIP number than the eligible crop insurance contract with the loss, the "P/CR Memo Company" field must also be entered. If "P/CR Memo Company" is not entered (value of 000),PASS assumes the same AIP number as the eligible crop insurance contract with the loss and will generate the loss credit accordingly.</li> <li>2 Rejected P/CR Memo Posting</li> </ol> <p>If the P/CR Memo Policy does not exist in the database or the P/CR Memo Policy has zero premium, then the P/CR Memo posting is rejected. Generated P/CR Memo amounts will not be allowed to create an overpayment on a eligible crop insurance contract. Such rejected postings are printed on a RAS error report titled "P/CR memo Reject Report." An example of this report is found in <b>Exhibit 1</b>. This report will be furnished to AIP with their Monthly Operations report.</p>
Type 27, 27A Records Land ID	<p>The Type 27 records are used to record/report corresponding land ids and associated information for the acreage reported on the Type 11 record. Report the Farm Service Agency Farm Serial Number, Tract Number and Field identifier for twenty percent of total acreage by the February monthly transaction cut-off following the reinsurance year.</p> <p>The Land Other Person Sharing P27A contains information about the Land Other Person Sharing relationships. Information contained on the record includes the Key fields necessary to track and identify the land being shared with the producer as well as identifying the Person Sharing and the share in the production.</p>
Type 49 Records	The Type 49 Records are used to remove all records for the eligible

Delete Records	<p>crop insurance contract from the data base(s) and the Dup process. Only one Type 49 Record will be processed per eligible crop insurance contract from the transaction file. Subsequent Type 49 Records for the same eligible crop insurance contract will be rejected.</p> <p>Type 49 records are processed independently after all other record types have been processed for the eligible crop insurance contract.</p>
Type 51 Records Conflict of Interest Policy Reporting Record	<p>Type 51 record is a record for potential conflict with a policy.</p> <p>Type 51 records are processed by the AIP for each policy and acceptance of this record is dependent upon acceptance of 54 or 55 or 56 records. Each record must provide a response identifying either 54 Company Employee, 55 Agent or 56 Loss Adjustor.</p> <p>All Conflict of Interest questions are required to have an entry. The information must be for the crop year of the crops reported under the policy.</p> <p>All Type 51 records reported in a batch will replace all previously reported Type 51 records. The Type 49 delete record has no impact on this Type 51 record.</p>
Type 54 Records Agency/Company Employee Data	<p>Type 54 is a record for Agency/Company employee data.</p> <p>Type 54 records require a tax identification number for all records. This record also includes Conflict of Interest (COI) questions.</p> <p>Type 54 records must be reported for any Company Employee who was required to complete a COI questionnaire under MGR-08-001 when their response to COI question #1 or #2 was "Yes".</p> <p>A 54 record must be accepted for the AIP and Company Employee ID before a corresponding 51 record will be accepted. All 54 records completely replace any previously submitted 54 records. Type 54 records will not appear in the Policyholder Tracking System.</p>
Type 55, 55A, 55B Record Agent Data	<p>The Type 55 Records are used to record/report agent information.</p> <p>Record 55 includes fields related to Conflict of Interest Questionnaire (COI) on the Type 51 record. The Type 55 record must be accepted for the AIP and Agent ID before 51 records will be accepted.</p> <p>Type 55 records may be processed independently or with all other PASS records. This data will be collected by AIP and will be stored in order to identify agents, provide agent counts for AIP, and facilitate the creation of the Agent Location Directory. The agent records on the database are maintained by the AIPs. The acceptance of Type 11, 13 and 14 acreage records is dependent on acceptance of a valid agent</p>

	<p>SSN on a Type 55 record.</p> <p>Multiple records can be submitted for each county serviced by the agent to be used to facilitate access to the active agents and alternative language agents available in the Agent Location Directory. RMA provides agent information to sell crop insurance or livestock insurance as a service to our customers.</p> <p>The Agent Location Directory will not display information for Inactive or Unlisted agents.</p> <p>Each submission must include the AIP's cumulative agent file for the reinsurance year in its entirety. AIPs are to only report licensed and/or certified agents who are actively participating in the delivery of FCIC approved products. The accepted agent records from each submission will replace all previously submitted agent records. Records will be rejected if the individual agent is currently disbarred or suspended.</p> <p>55A Insurance Agent Agency identifies the Agency for an Agent.</p> <p>55B Insurance Agent Servicing State identifies servicing area for agent locator.</p>
Type 56 Record Loss Adjuster Data	<p>The Type 56 Record is used to record/report loss adjuster information</p> <p>Record 56 includes fields related to Conflict of Interest Questionnaire (COI) on the Type 51 record. The Type 56 record must be accepted by the AIP and Adjuster ID before the Type 51 records will be accepted.</p> <p>Type 56 records may be processed independently or with all other PASS records. This data will be collected by AIP and will be stored in order to identify loss adjusters, provide loss adjuster counts and facilitate compliance analysis. Each submission must include the AIP's cumulative adjuster file for the reinsurance year in its entirety. The accepted adjuster records from each submission will replace all previously submitted adjuster records. The acceptance of Type 21 and 22 loss records is dependent on acceptance of a valid loss adjuster SSN on a Type 56 record. Records will be rejected if the individual adjuster is currently disbarred or suspended.</p>
Type 57 Record Quality Control Reporting	<p>Record 57 includes an additional response related to #19 – Conflict of Interest Review. An "R" can be reported for "conflict no longer exists" in place of "Y" or "N".</p> <p>The 57 records are to be submitted annually by April 30 following the crop year for all reviews required to be performed by Appendix IV.</p>
Type 58 Record Notice of Loss Reporting	<p>Type 58 records are be used to provide damage estimates to USDA, and keep RMA apprised of potential losses and occurrences by cause, date, location and type (prevented planting, replant,</p>

	production loss, other) on a national level. This will be unverified information. Notice of loss records must be submitted within five business days of the date the AIP received the notice of loss for the policy. Multiple Type 58 records must be submitted for a crop/county combination using different record numbers. Timely processed Type 10 and Type 14 records are required before a Type 58 record will be accepted. Type 58 records can be deleted using the Type 49 record.
Type 60 Ineligible Producer Input Record	Type 60 records are used to submit information regarding a producer's ineligibility status for participation in the crop insurance program. These records must be submitted in a separate file from all other record types and placed in the IT Input directory that has been established for each transmitting AIP on the IP server. Once per day a process collects all files transmitted, validates the data submitted and outputs 3 types of files to the IT Output directory on the IP server : 1) .acp - accepted transactions, 2) .rej - rejected transactions and 3) .err - error codes. The accepted transactions are loaded to the Ineligible Tracking System database and notification letters are generated and distributed to the ineligible producers upon their initial entry into the system for a period of ineligibility.
Type 60E Ineligible Producer Error Record	Type 60E records are generated during the Ineligible Tracking edit process. They will contain all errors for each Type 60 record that is rejected during the edit process. The file containing these records is placed in the submitting companies' IT Output directory on the IP server (.err).
Type 61 Ineligible Producer Output Record	Type 61 records are generated from the Ineligible Tracking System database and output to the IT Output directory on the IP server for all companies. This file is an accumulation created daily after each ITS load of ALL producers that have been reported as ineligible, their period(s) of ineligibility and their current eligibility status. This also includes persons reported by the Risk Management Agency for suspension/disqualification/debarment.
Type 65 CAT Fee Receivable Record	Type 65 records are submitted along with Type 60 (Ineligible Producer) if the debt is all or partially due to unpaid CAT fees
Type 70 Record	Type 70 records are submitted monthly by AIPs for their SBOB to reflect the current status of the AIP Database
Type 71 Record	Type 71 records are returned by RMA identifying any differences at the state level from the SBOB data.
Type 81 Record Policy Holder Tracking Experience Inquiry	<p>Type 81 records are output records that are initiated by the setting of the Experience Inquiry flag on the Type 14 record (position 92) for an eligible crop insurance contract.</p> <p>If the Experience Inquiry flag is a 'Y' only the previous year information will be accessed.</p> <p>If the Experience Inquiry flag is a 'F' the previous five years of information will be accessed</p>

	Both the one-year and five year inquiries are based on the ID Number from the associated Type 10 record (position 82) to perform a search against the data to locate all information for the producer and any SBI's for the crop/state/county contained in the requesting 14 record. The data retrieved is imbedded in the "body" of the Type 81 record (positions 21 - 331) in the same field order and format as that specific in the record type. All Type 10, 11, 14, 15 and 21 records found are returned to the requesting AIP. The Type 14 record that requested the inquiry is imbedded in the Type 81 record when: 1) the value of the Experience Inquiry flag is an invalid value, 2) no prior year records were found for the producer, or 3) when the producer's prior year insurance was with the requesting AIP. RMA may limit repeated Policy holder tracking requests.
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## B. eDAS Processing Considerations

1. RMA maintains all eDAS transactions in a database. Exception for new eDAS format, this will be the most recently accepted transactions stored in the database. Once an original, modify, delete, or cancel passes all edits and therefore is accepted by eDAS, it will be copied to the Policy database.
2. eDAS does not require the bundling of an entire set of sections for a policy. Once the data is accepted only the 'KEY' and data being modified will need to be resent.
  - a. Note - under the new eDAS format on an update, only the key fields that define the sections are required plus any changed fields or new sections.
3. Change flag will default to 2 and process flag will default to 1 unless otherwise indicated. A section will inherit the change flag and/or process flag of the parent section unless set by that section. Example: <SBI process flag = "2">.
4. Acceptable sections and specific handling considerations are as follows:

Agent	The AGENT section ( <b>Exhibit 112</b> ) is used to record/report agent information. This data will be used by RMA to identify agents, provide agent counts for AIP, facilitate the creation of the Agent Location Directory and RMA planning purposes. eDAS will separate agencies for an agent by using the DETAIL_NUM, listed on the APPENDIX III AGENT section in the DETAIL section. Each DETAIL_NUM represents a separate agency (i.e. Agent ID Code). Use 'comma delimited' to list multiple directory counties for an agent (Example: <DIRECTORY_COUNTY>1,2,215</DIRECTORY_COUNTY>). The acceptance of PRODUCER and PREMIUM are dependent on the acceptance of a valid agent SSN. Only report licensed and/or certified agents who are actively participating in the delivery of RMA approved livestock and AGR/AGR-L products. Records will be rejected if the individual agent is currently disbarred or suspended.
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Adjuster	The ADJUSTER section (AGR/AGR-L, <a href="#">Exhibit 111</a> ) is used to record/report loss adjuster information. Indemnity section (AGR/AGR-L, <a href="#">Exhibit 151-2</a> ) is dependent on acceptance of a valid loss adjuster SSN. Data will be rejected if the individual adjuster is currently disbarred or suspended.
Employee	The Employee section ( <a href="#">Exhibit 113</a> ) is used to record/report employee information. The company is required to report employee (other than agent or adjuster) if the employee was required to complete a COI Questionnaire under MGR098-001 when the response to COI question #1 or #2 was 'YES'
Reviewer	The REVIEWER section ( <a href="#">Exhibit 116</a> ) is used to record/report reviewer information. For Livestock the AIP is required to review a minimum of 5 percent of the insurance contracts and 5 percent of indemnified contracts. This data will be used by RMA to facilitate compliance analysis. Premium and indemnity that have been reviewed (flagged) are dependent on eDAS acceptance of a reviewer. Reviewer SSN reported on premium and indemnity will be verified against the reviewer database.
Conflict	The Conflict section ( <a href="#">Exhibit 118</a> ) is used to record/report COI information. The company is required to report COI information if any employee has indicated a conflict with a policy. An Agent, Adjuster or Employee section must be accepted for the AIP and COI Respondent Tax ID before a Conflict Section will be accepted.
Entity	The Entity section ( <a href="#">Exhibit 121</a> ) is used to record/report the producer information
SBI	The SBI section( <a href="#">Exhibit 126</a> ) is used to record/report substantial business interests information related to the entity. The company is required to collect and report all entities with significant business interests. This data will include SSN, EIN, and share of the SBIs.
Policy	The Policy section ( <a href="#">Exhibit 122</a> ) is used to record/report the policy number
Fund	<p>The FUND section (Livestock, <a href="#">Exhibit 130</a> and AGR/AGR-L, <a href="#">Exhibit 131</a>) is used to record/report fund designation information. Livestock - eDAS will generate initial fund data with fund designation flag set to 'C' (Commercial Fund) when premium is accepted AIP may designate to Private Market Fund by resubmitting fund data with flag set to 'P' within two Federal workdays after the acceptance date of premium (fund lockdown date). Example: premium accepted by eDAS/UCM Monday, lockdown will be Wednesday at midnight. If change flag equals 3, AIP must submit a request to Reinsurance Services Division (RSD) for approval.</p> <p>AGR/AGR-L - The Fund section will be used to designate for the crop/plan Assigned Risk, Developmental, or Commercial Fund. If a crop/plan was established into the Assigned Risk or the Developmental Fund, the crop/plan can be timely transferred to the Commercial Fund.</p>
	The PAYMENT section (AGR/AGR-L, <a href="#">Exhibit 124</a> ) is used to record/report payments by producers for each policy. Only one

Payment	payment section per payment type code will be accepted for the policy. When reporting state subsidy use payment type code “4”.
Crop Policy	<p>The Crop Policy section (Livestock, <b>Exhibit 119</b> and AGR/AGR-L, <b>Exhibit 123</b>) is used to record/report the crop, insurance plan, and location county.</p> <p>A policy cannot be active for both livestock products (LGM and LRP) for a commodity at the same time within the same reinsurance year and location state. The existing policy can be cancelled if the coverage period has ended and the producer wants to insure another livestock product. Example: Product 1 was purchased for 90 days of coverage. At the end of that coverage the insured can cancel product 1 and purchase product 2 during the next sales period.</p> <p>For AGR/AGR-L, only 1 crop policy per Tax-ID (Entity) nationwide is allowed. Cannot have both insurance plans.</p>
Premium	<p>The PREMIUM section (Livestock, <b>Exhibit 135-0 &amp; 140-0 and AGR/AGR-L, Exhibit 151-0</b>) is used to record/report premium and liability information.</p> <p>Insurance plan will determine the availability of eDAS and type of data necessary in submission of premium. Premium is dependent on eDAS acceptance of agent, entity, SBI (if applicable) and reviewer (if applicable) and the acceptance by the UCM. Coverage may not be available if the UCM has been expended. When premium is accepted eDAS will assign an approval number. If change flag equals 3, AIP must submit a request to Reinsurance Services Division (RSD) for approval.</p> <p>For AGR/AGR-L, all detail information must be submitted each time any information is updated. The detail section contains information that’s used in the validation and determination of premium.</p>
Disbursement	The DISBURSEMENT section (AGR/AGR-L, <b>Exhibit 150</b> ) is used to record/report disbursement information
Indemnity	The INDEMNITY section (Livestock, <b>Exhibit 135-2 &amp; 140-2) and AGR/AGR-L, Exhibit 151-2</b> ) is used to record/report indemnity information. Indemnity is dependent on eDAS acceptance of agent, entity, SBI (if applicable), premium, reviewer (if applicable), and adjuster (if applicable). AIP is responsible for determining if an indemnity is due and submission of data to eDAS for validation and acceptance. If change flag equals 3, AIP must submit a request to Reinsurance Services Division (RSD) for approval.

5. Following is an example of the XML\_TEMPLATE for AGR/AGR-L:

<TRANSACTION> <AGENT>
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```

        <!-- Refer to Exhibit 112 for tag information. -->
        <AGENT_DETAIL>
            <!-- Refer to Exhibit 112 for tag information. -->
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            <!-- Refer to Exhibit 112 for tag information. -->
        </AGENT_DETAIL>
    </AGENT>
</TRANSACTION>

<TRANSACTION>
    <ADJUSTER>
        <!-- Refer to Exhibit 111 for tag information. -->
        <ADJUSTER_DETAIL>
            <!-- Refer to Exhibit 111 for tag information -->
        </ADJUSTER_DETAIL>
    </ADJUSTER>
</TRANSACTION>

<TRANSACTION>
    <REVIEWER>
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</TRANSACTION>

<TRANSACTION>
    <ENTITY>
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        <ENTITY_DETAIL>
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        <SBI>
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            <!-- Refer to Exhibit 126 for tag information. -->
        </SBI>
    </ENTITY>
</TRANSACTION>

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        <FUND>
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        <PAYMENT>
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        </PAYMENT>
        <DISBURSEMENT>
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        </DISBURSEMENT>
        <CROP_POLICY>
            <!-- Refer to Exhibit 123 for tag information. -->
        <PREMIUM>
            <!-- Refer to Exhibit 151-0 for tag information
-->

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information -->
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    </PREMIUM>
    <INDEMNITY>
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information -->
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information -->
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information -->
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information -->
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</POLICY>
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#### D. Example of XML\_TEMPLATE for Livestock:

```

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    <!-- Refer to Exhibit 112 for tag information. -->
    </AGENT_DETAIL>
  </AGENT>
</TRANSACTION>

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```

        <!-- Refer to Exhibit 112 for tag information. -->
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</AGENT>
</TRANSACTION>

<TRANSACTION>
    <REVIEWER>
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</TRANSACTION>

<TRANSACTION>
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        <!-- Refer to Exhibit 121 for tag information. -->
        <ENTITY_DETAIL>
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        </ENTITY_DETAIL>
        <SBI>
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        </SBI>
        <SBI>
            <!-- Refer to Exhibit 126 for tag information. -->
        </SBI>
    </ENTITY>
</TRANSACTION>

<TRANSACTION>
    <POLICY>
        <!-- Refer to Exhibit 122 for tag information. -->
        <CROP_POLICY>
            <!-- Refer to Exhibit 119 for tag information. -->
            <PREMIUM>
                <!-- Refer to Exhibit 135 for LRP tag information -->
                <!-- Refer to Exhibit 140 for LGM tag information -->
                <FUND>
                    <!-- Refer to Exhibit 130 for tag information. -->
                </FUND>
                <INDEMNITY>
                    <!-- Refer to Exhibit 135-2 for LRP tag information -->
                    <!-- Refer to Exhibit 140-2 for LGM tag information -->
                </INDEMNITY>
            </PREMIUM>
            <PREMIUM>
                <!-- Refer to Exhibit 135 for LRP tag information -->
                <!-- Refer to Exhibit 140 for LGM tag information -->
                <FUND>
                    <!-- Refer to Exhibit 130 for tag information. -->
                </FUND>
                <INDEMNITY>
                    <!-- Refer to Exhibit 135-2 for LRP tag information -->
                    <!-- Refer to Exhibit 140-2 for LGM tag information -->
                </INDEMNITY>
            </PREMIUM>
        </CROP_POLICY>
        <CROP_POLICY>
            <!-- Refer to Exhibit 119 for tag information -->

```

```

        <PREMIUM>
        <!-- Refer to Exhibit 135 for LRP tag information -->
        <!-- Refer to Exhibit 140 for LGM tag information -->
        <FUND>
        <!-- Refer to Exhibit 130 for tag information. -->
        </FUND>
        <INDEMNITY>
        <!-- Refer to Exhibit 135-2 for LRP tag information -->
        <!-- Refer to Exhibit 140-2 for LGM tag information -->
        </INDEMNITY>
    </PREMIUM>
</CROP_POLICY>
<CROP_POLICY>
<!-- Refer to Exhibit 119 for tag information -->
</CROP_POLICY>
</POLICY>
</TRANSACTION>

```

E. Example of XML error layout:

```

<ERROR>
<ELEMENT_NAME></ELEMENT_NAME>
<NUMBER></NUMBER>
<ID></ID>
<NAME></NAME>
<RECEIVED_VALUE></RECEIVED_VALUE>
<EXPECTED_VALUE></EXPECTED_VALUE>
<TEXT></TEXT>
</ERROR>

```

F. Example of XML warning layout:

```

<WARNING>
  <ELEMENT_NAME></ELEMENT_NAME>
  <NUMBER></NUMBER>
  <ID></ID>
  <NAME> </NAME>
  <RECEIVED_VALUE />
  <EXPECTED_VALUE />
  <TEXT></TEXT>
</WARNING>

```

G. Example of XML Disbursement with process flag 1, 2, or 3 where an Indemnity already exists.

Automatic

deletion of Indemnity is required:

```

<policy process_flag="2" change_flag="2">
  <disbursement process_flag="3">
    </disbursement>

    //Automatic deletion of Indemnity by eDAS
    <crop_policy process_flag="2" change_flag="2">
      <indemnity process_flag="3">
        </indemnity>
      </crop_policy>
    </policy>
  </policy>

```

```

//Any other XML sent by company for this policy
<??>
</??>
</policy>

H. Example of XML Indemnity with process flag of 3 (delete) causing Disbursements to be set to warnings
automatically by eDAS.

<policy process_flag="2" change_flag="2">
  <crop_policy process_flag="2" change_flag="2">
    <indemnity process_flag="3">
      </indemnity>
    </crop_policy>

    //eDAS automatically does an update on Disbursement(s) and sets them to have warnings.
    <disbursement process_flag="2" change_flag="2">
      </disbursement>
    </policy>

I. Example of XML message layout:

  <message>
    <element_name></element_name>
    <number></number>
    <id></id>
    <text></text>
  </message>

```

### C. Ineligible Tracking System Processing Considerations

The PASS edit process accesses the ineligible tracking system database to validate policy records. PASS will reject eligible crop insurance contracts for a producer if the applicable sales closing date/termination date for the crop in the county falls during a period of ineligibility. Consider the following examples:

Single Sales Closing Date			
Prior Year Term Date is the same as the Sales Closing Date	Producer Reported as Ineligible	<ul style="list-style-type: none"> <li>• Producer Became Ineligible on 3/15/2010</li> <li>• A policy is submitted for a crop with sales closing date and prior year termination date of 3/15/2010</li> </ul>	Policy rejects for the crop since the sales closing date is greater than or equal to the date of the ineligibility. If the sales closing date had been prior to the date of ineligibility, the crop policy would have been accepted.
Prior Year Term Date is the same as the Sales Closing Date	Producer Reported as Ineligible and has Become Eligible	<ul style="list-style-type: none"> <li>• Producer became ineligible on 9/30/2009</li> <li>• Producer became eligible on 3/16/2010</li> <li>• A policy is submitted for a crop with a sales closing date and prior</li> </ul>	The policy would be rejected for that crop since the sales closing date falls within the period of ineligibility. If the eligible date had been 3/15/2010, the crop policy

		year term date of 3/15/2010	would have been accepted.
Prior Year Term Date is the same as the Sales Closing Date	Producer with more than one period of ineligibility	<ul style="list-style-type: none"><li>• Producer became ineligible on 9/30/2009</li><li>• Producer became eligible on 12/01/2009</li><li>• Producer became ineligible on 2/01/2010</li><li>• Producer became eligible on 3/15/2010</li><li>• A policy is submitted with 3 crops:<ul style="list-style-type: none"><li>○ Crop 1 – SCD = 10/31/2009</li><li>○ Crop 2 – SCD = 1/31/2010</li><li>○ Crop 3 – SCD = 2/28/2010</li></ul></li></ul>	<p>The policies for Crop 1 and Crop 3 would be rejected since the sales closing dates fall within the period of ineligibility.</p> <p>The policy for Crop 2 would be accepted since the sales closing date for that crop falls within a period of time that the producer is eligible.</p>
Prior Year Term Date is later than the Sales Closing Date	<ul style="list-style-type: none"><li>• Producer became ineligible on 4/15/2010</li><li>• A policy is submitted for a crop with sales closing date of 3/15/2010 and prior year termination date of 4/15/2010</li></ul>		The policy would be rejected for that crop since the prior year termination date is the same as the ineligible date. The prior year termination date is used to determine eligibility in this situation because the producer would unfairly be allowed a policy for the next crop year if the sales closing date had been used. If the sales closing date had been used to determine eligibility, the producer would have no penalty for not paying for the prior year policy premium/CAT fees by the term date.
Multiple Sales Closing Dates			
New Eligible crop insurance contract	Producer ineligible on first SCD	Producer eligible by second SCD	Record for second SCD will be accepted
Continuing eligible crop insurance contract	Producer ineligible on 1 <sup>st</sup> SCD	Record will be rejected because producer must be eligible on the 1 <sup>st</sup> sales closing date to be eligible for the crop for the submitted year	
Agent Eligibility			

<ul style="list-style-type: none"> <li>• Agent is Reported as Ineligible on 9/10/2010</li> <li>• Agent becomes eligible on 9/10/2015</li> </ul>	<ul style="list-style-type: none"> <li>• Eligible crop Insurance Contract 1 – II Record agent signature date = 9/8/2010</li> <li>• Eligible Crop Insurance Contract 2 – 11 Record agent signature date = 9/14/2010</li> </ul>	<ul style="list-style-type: none"> <li>• Agent is eligible to write Contract 1 because the agent signature date is prior to the ineligible date.</li> <li>• Agent is ineligible to write Contract 2 because the agent signature date falls between the agent’s eligible and ineligible dates. The 11 record would reject.</li> </ul>
<b>Loss Adjuster Eligibility</b>		
<ul style="list-style-type: none"> <li>• Loss adjuster becomes ineligible on 12/3/2010</li> <li>• Loss adjuster becomes eligible on 12/3/2014</li> </ul>	<ul style="list-style-type: none"> <li>• Loss 1 – Type 21 record loss adjuster signature date = 12/08/2010</li> <li>• Loss 2 – Type 21 record loss adjuster signature date = 11/30/2010</li> </ul>	<ul style="list-style-type: none"> <li>• The loss adjuster is ineligible for Loss 1 because the loss adjuster signature date falls between the loss adjuster’s ineligible and eligible dates.</li> <li>• The loss adjuster is eligible for Loss 2 because the loss adjuster signature date is before the loss adjuster became ineligible.</li> </ul>

#### **D. Duplicate Edit Processing Considerations**

1. The duplicate edit process is designed to reject duplicate eligible crop insurance contracts or identify possible duplicate eligible crop insurance contracts reported to RMA. The process determines the ownership of an eligible crop insurance contract and is based on the definition of a duplicate eligible crop insurance contract and a possible duplicate eligible crop insurance contract key. Duplicate or possible duplicate eligible crop insurance contracts are identified by PASS errors and are reported to companies weekly.
2. In the case of Duplicate eligible crop insurance contracts (i.e. same tax id number, tax id type, entity type, location state, location county, crop code, and type code (grapes only crop code 0052 and 0053)), PASS will determine the owner IP based on signature date and transferred cancellation fields on the Type 14 record.
3. If any of the duplicate eligible crop insurance contracts are indicated as a ‘Transfer and Cancellation’ eligible crop insurance contract on the 14 record, the Dup process will use the earliest signature date for the current sales period to determine ownership. The ‘sales period’ starts the day following the earliest sales closing date for the previous crop year and continues through the latest sales closing date for the current crop year. If none of the duplicate eligible crop insurance contracts are indicated as being a ‘Transfer and Cancellation’ eligible crop insurance contract, then ownership will be determined by earliest signature date without regard to the sales period.
4. Companies will be notified of Duplicate eligible crop insurance contracts on a batch transmission basis through the PASS edit process. In addition, on the first business day following the transaction cutoff date for weekly data reporting, companies will be provided a summary report identifying the count of duplicate policies with another AIP and the number of ownership eligible crop insurance contracts where another AIP has a duplicate eligible crop insurance contract.

5. After the weekly cutoff, the RORYOWN and RORYDUP reports will be generated from the duplicate eligible crop insurance contract information captured duringPASS processing. For RY 2010 and succeeding years, RMA will removePASS determined duplicate crop/county eligible crop insurance contract records (Type 14 records), in the RORYDUP report, from the Dup process and the Policy databases.
6. Once this weekend process is complete, the PASS determined 'owner' eligible crop insurance contract will remain in the PASS System and should not receive a duplicate error when re-transmitted. AIPs must take action to ensure that duplicate eligible crop insurance contracts listed in the RORYDUP report are NOT re-transmitted toPASS.

## 14 PASS Reports

PASS provides AIPs the following reports, transmission data files and reference files to assist error resolution and status.

<b>Reports</b>	
Summary Report (.sum)	Provides transactional, financial and error statistics on each transmission. The report identifies the input file name, the run date and time, and the received date and time. The transactional statistical section provides counts by record type of: submitted; accepted; rejected; and suspended records. The financial statistical section provides the associated dollar amount of: submitted, (if a type 97 record is included in the transmission); accepted; rejected; and suspended records. The error statistics sections lists the error code and message received and the number of records in error.
Premium and Loss Error Report (.rp2)	Provides by crop, the dollar amount of premium and indemnity rejected by error code combination. The number of records and eligible crop insurance contracts are also listed.
Error Report (.rpt)	A formatted report by eligible crop insurance contract listing the record(s) and field(s) in error. It identifies the data in error and what is expected in the field.
<b>Transmission Files</b>	
Rejected File (.rej)	Contains the records rejected with errors by PASS with an additional 50 bytes of data used internally by PASS.
Error File (.err)	Lists the record key with an error, the error code, data in error and the expected data
Accepted File (.acp)	Contains the records accepted by PASS with an additional 50 bytes of data used internally. AIPs may request this file be placed in their directory.
Accepted Fund Designation File (.fun)	Contains the Type 9 records accepted by PASS with an additional 50 bytes of data used internally. This file is provided to AIPs confirming fund designation by RMA
<b>Weekly Reports/Files</b>	
Duplicate Report Files	Contain eligible crop insurance contracts identified by PASS as being a duplicate. Issued on the IPSEVER every Monday at 12:00 p.m.
IPRYSUM.TXT	Report file showing duplicate policy and owner policy summary information for IP/R Y
IPRYDUP.TXT	Data file containing duplicate policy identification along with owner policy information for IP/R Y
IPRYOWN.TXT	Data file containing owner policy identification along with duplicate policy information for IP/R Y
Mini-40 Reports	Generated to the IP SERVER every Monday at 12:00 p.m. and on Tuesday evening a

	6:00 p.m. Lists of premium and indemnity by policy, with totals accepted by PASS the previous week.
Written Agreement Reports	Generated to the IP SERVER every Monday at 12:00 p.m. Each IP will be provided with two files. A file for their own written agreement policy data that has been accepted through PASS. The second file for the written agreements offered by the RMA Regional Office for that IP. Files are made available to the IPs via the “ip server” and to the RO’s via the RMKC00a system. The file naming conventions are “ipyywaip.txt” (IP data) and “ipyywaro.txt” (RO data)
<b>Reference Files</b>	
Max Yield Text Files	Contain values used by PASS for edits for the AIPs use. Generated to the Miscellaneous Files directory on the ftp server on Monday morning and when the files are updated during the week. Contains the highest yield, corresponding maximum warning yield level (beyond which a yield must be reviewed), the maximum yield allowed and any override value documented and approved by PDD for each insurable State, Crop, County, Type, and Practice. Default values are provided at the State and Crop level.
Error Message Text Files	Contain the associated text message for the numeric PASS errors. These files can be found in the Miscellaneous Files directory by RY.
Land Location File	Consists of Public Land Survey identifiers indexed by state and county. This is a copy of the file used to validate PLSS identifiers submitted by AIPs on the type 11 and 27 records and on <b>exhibits 135 and 140</b> . Data is derived from PLSS spatial data (i.e., G format) collected and maintained by RMA. Modifications are made (a) when queries from AIPs are validated and (b) when newer or more complete PLSS spatial data is acquired for a specific state.

15 – 20 Reserved



## Part 3 Accounting

### 21 Accounting Processing Considerations

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#### A. Timing of Monthly Payments

1. RMA will generate and remit payments due to the AIP in accordance with the SRA, based on data validated in PASS, no later than the first banking day after the 14<sup>th</sup> calendar day following RMA's receipt of both the detailed reinsurance contract data file, and the certified (signed) hard copy monthly/annual operation report.
  - a. FCIC will pay the net amount due from FCIC to the AIP as reflected in the FCIC-generated report, reduced or increased where appropriate, for any differences between the reports submitted and the data validated.
    - i. FCIC will net together for payment purposes, multiple reinsurance year reports
    - ii. FCIC will make payments to AIPs via Electronic Funds Transfer (EFT) through the U.S. Treasury
    - iii. FCIC will pay interest in accordance with the interest provisions of the Contract Disputes Act (41 U.S.C. 601 et seq.) on any payment which is not sent to the AIP by the dates provided by the SRA.
  - b. RMA generated reports will be regenerated to contain AIP entries on the Premium Due and Premium Due Without Payments Worksheets upon receipt of the certified report/worksheet from the company if received by the due date for monthly reporting.

#### B. Reimbursement of Losses

1. For any AIP that elects to use escrow funding: FCIC will fund the escrow account within three (3) business days after the loss transactions are accepted in FCIC'S Escrow System. Beginning with the October monthly settlement report for the reinsurance year, the escrow funded amount, as of the transaction cutoff date for the first full week of the month will be reconciled with the escrow loss data accepted on the monthly or annual report. Any escrow requests which have not been funded as of the transaction cutoff date for the first full week of the month will not be included in that month's report. Any difference in the escrow funded amount and the losses validated by RMA will be refunded monthly by the AIP to FCIC.
2. AIPs may also report loss data through PASS prior to check issuance (for validation purposes), in accordance with instructions on the Type 20 record descriptor contained in this Appendix.
  - a. Losses reported in this manner will not be funded Through Escrow, and will not appear on the Monthly/Annual Operations Report.
  - b. To obtain escrow funding, AIPs must re-submit loss data consistent with the Escrow Agreement and instructions for the Type 20 record descriptor contained in this Appendix.

3. Any AIP who elects not to utilize Escrow Funding will be reimbursed on the Monthly/Annual Operations Report for paid losses which have been validated and accepted in PASS as of the monthly transaction cutoff date. Any loss will be considered paid by the AIP, when the instrument or document issued as payment has cleared the AIP's bank account.

### **C. Administrative Expense Reimbursement**

1. The FCIC will pay the AIP an A&O Subsidy as specified in the SRA beginning with the October Monthly Operations report for the reinsurance year for the 2011 reinsurance year, and beginning with the October monthly settlement report following the end of the reinsurance year for 2012 and succeeding reinsurance years.
  - a. All A&O Subsidy amounts paid are subject to correction at any time, and by the Monthly/Annual Operations Report following detection of the error.
  - b. Any rejected eligible crop insurance contract due solely to an identified PASS edit error, will be fully compensated on that month's accounting report.
2. The A&O Subsidy applicable to the eligible crop insurance contract will be reduced whenever the identified required LRR data has not been timely and accurately provided to RMA or such information is revised after the LRR Transaction Cutoff Date.
  - a. If the required LRR data first passes acceptance edits after the LRR Transaction Cutoff Date or is revised after the LRR Transaction Cutoff Date, the A&O Subsidy will be reduced by:

1%	Up to the weekly cutoff for the week containing the 30 <sup>th</sup> calendar day after the LRR transaction cutoff date
3%	After the weekly cutoff containing the 30 <sup>th</sup> calendar day after the LRR transaction cutoff date up to and including the weekly cutoff for the 60 <sup>th</sup> calendar day, or
6%	After the weekly cutoff containing the 60 <sup>th</sup> calendar day after the LRR transaction cutoff date

See Exhibit 5-1.

3. The A&O Subsidy applicable to the eligible crop insurance contract will be reduced in accordance with the chart below, when acreage records are accepted in PASS for the first time after the transaction cutoff date for the 6<sup>th</sup> full week after the week which includes the latest acreage reporting date as specified in the ADM and PASS processing considerations.

<b>LFA REDUCTION CHART</b>	
<b><u>Weeks After Acreage Report Due</u></b>	<b><u>Reduction Percent</u></b>
7 <sup>th</sup> through 9 <sup>th</sup>	1.5%
10 <sup>th</sup> through 12 <sup>th</sup>	3.0%
13 <sup>th</sup> or more	4.5%

An example of the FCIC Administrative Reduction Worksheet for late filed acreage is provided in **Exhibit 5-2**.

4. Reimbursement for CAT Loss Adjustment Expense will be calculated in accordance with the SRA, and will be included on the Monthly/Annual Operations Reports beginning with the same monthly settlement report that contains initial A&O subsidy payments for a specific reinsurance year (**see C.1. above**).
5. Any payment received under Section IV.h. of the SRA, must be paid by the last business day of the month for the Monthly/Annual Operations Report cutoff following RMA's notification to the AIP of the amount due.

#### **D. Interest Calculations**

1. The AIP will be charged interest in the following cases: Late payments of the balance due on Monthly/Annual Operations Reports, overpayment by FCIC of losses or expense reimbursements, increases in the Premium Due Without Payments Report, and on Premium Variations and on uncollected premiums not paid which are reported on the Premium Due Worksheet. The AIP will pay FCIC interest at the annual fixed rate of 15% (**See Exhibit 6**).
2. If the balance due FCIC on the Monthly/Annual Operations Report is not received by the last banking day of the month, via electronic transfer to FCIC's account at Treasury, interest will attach from the day following the last banking day of the month and will be charged through the day funds are received by Treasury.
3. The AIP will repay, with interest, any amount paid to the AIP by FCIC which is subsequently determined by FCIC or the AIP, to have been not due to the AIP, such as overpaid indemnities or excessive expense reimbursements. Interest begins accruing based on the date of the Final Determination letter. (See Interest Calculation Exhibit 1-12 Example 2).
4. Increases in premium amounts for an eligible crop contract which occur after a billing date are reported on the Premium Due Without Payments Report. Interest on these increased amounts will accrue from the first of the month following the AIP Payment Date, and will accrue through the end of the month for the monthly report on which the increase was included (See Exhibit 6-2 Example 3).
5. The AIP will pay interest on any uncollected premiums if the uncollected premiums are not paid to FCIC by the month following the month of the billing date. Interest will attach on any uncollected premiums from the first of the month following the month of the billing date. A full month's interest will be charged for any month or portion of a month that the uncollected premiums are not paid to FCIC (See **Exhibits 6-4 and 6-5**).

6. All payments are subject to post audit by FCIC.

#### **E. AIP Accounting**

1. All accounting reports must be downloaded by the AIPs via telecommunications processing. These reports will be made available on a monthly basis. AIPs may query the telecommunications facility any time to see if the accounting reports are ready to be downloaded.
2. AIPs must monitor the escrow account balance and maintain sufficient collateral coverage to insure timely funding of all loss data. If there is a shortfall of funds in the escrow account, it is the AIPs responsibility to deposit funds to cover any shortages.
3. Monthly Operations Reports are required to be submitted through annual settlement time. Annual settlement Operations Reports must continue to be submitted for any month that revised data are submitted. Court action, compliance, audit or investigative related finds by the Government or the AIP after the October Accounting cut-off following 5 years from the beginning of the reinsurance year must be reported to RMA and will be processed manually. Operations Reports must be received by RMA by the last banking day of each month corresponding to the transaction cut-off date.
4. If uncollected, the producer premium for each billing date is due from the AIP at the end of the month of the billing date. Uncollected premiums for each billing date must be reported by the AIP by the transaction cutoff date for the Monthly Operations Report following the month of the billing date. Interest will be charged on all uncollected premiums not paid to FCIC by the AIP payment date from the first of the month following the billing date at the rate of 15% per annum. The AIP must enter data into the appropriate columns on the Premium Due Worksheet to indicate their intent whether to pay uncollected premiums and return a signed copy of the report/worksheet along with the report, to be received by RMA by the last business day of the month corresponding to the transaction cutoff date. (See Exhibit 6).
5. When producer premiums are collected by the AIP before the billing date, any premium collected during a calendar month must be reported on the Monthly Operations Report submitted during the next calendar month and payment made by the AIP Payment Date. All premiums not collected must be paid to FCIC at annual settlement whether or not they are collected from insured.
6. For the purpose of collection CAT fees and accrued interest from insureds, there are responsibilities that must be undertaken by the AIP and RMA. These responsibilities shall be in accordance with 7CFR 457.8, which states "Interest will accrue at a rate of 1.25 percent simple interest per calendar month, or any portion thereof, on any unpaid amount owed to us or on any unpaid administrative fees owed to FCIC."
  - a. AIPs are responsible for calculating and collecting interest on CAT fees in accordance with 7 CFR 457.8 beginning 30 days after the premium billing date until the crop termination date.
  - b. AIPs shall transmit a 60 and 65 record through the Ineligible Tracking System for the principle amount only, for unpaid CAT fees within 7 to 21 days after the crop termination

date. At this time these fees become Federal debt and all collection efforts on the part of the AIP shall cease.

- c. AIPs are responsible for any questions that an insured may have regarding the validity of this debt or payment made prior to the crop termination date. After the crop termination date, all questions regarding amounts due including interest accrued, shall be referred to RMA.
  - i. Records regarding an unsatisfied debt pertaining to a CAT policy must be retained indefinitely in accordance with **Section IV.G.6.** of the SRA.
  - ii. If an AIP receives payment for a Federal debt, they are to transmit a type 12 record with a payment type code of “02” for the **entire** amount received within 7 days of the receipt of the payment. (Timing is critical since the debt may be referred by RMA to Treasury for cross servicing and any amounts due the insured from any Federal agency will be reduced by the Federal debt that includes CAT fees and accrued interest.
  - iii. RMA shall calculate interest in accordance with 7 CFR 457.8 on any unpaid CAT fees reported to RMA beginning on the termination date until the debt is satisfied.
  - iv. RMA will answer any questions regarding the amount of the Federal debt or any payments made **after** crop termination since subsequent interest may have accrued.
  - v. RMA shall take over all collection efforts of unpaid CAT fees upon termination date and the submission of the type 60 and 65 records.
  - vi. RMA may refer the Federal debt to Treasury for cross servicing.
7. Escrow funding and reported loss data will be reconciled on each monthly and annual operations report.
8. Any aggregate underwriting loss of the AIP will be paid to FCIC by the AIP with each monthly operations report as calculated by the reinsurance run report generated by RMA. Any underwriting gain due the AIP will be paid at annual settlement.
9. The AIP must enter data into the appropriate columns on the Premium Due Without Payment Worksheet to indicate any increase in premium and return a signed copy of the report/worksheet along with the monthly operations report, which must be received by RMA by the last business day of the month corresponding to the transaction cutoff date (See **Exhibit 6-3**).
  - a. The insured's premium due is calculated by subtracting the paid and loss-credits from the producer premium amount for each policy and billing date. The total due is then summarized by billing date.
10. The new amount due FCIC as reflected in the Monthly or Annual Operations Report, must be paid by EFT by the later of, 10 calendar days of being issued by RMA or last business day of each month corresponding to the transaction cutoff date for that month. When payment is submitted to FCIC based on a report generated by the AIP or its reporting agent and supporting data is subsequently rejected, the AIP must remit the difference by EFT within seven (7)

calendar days of the date the AIP was notified of the discrepancies. In instances where an AIP generated report differs from RMA generated Operations Reports, payments will be based on the RMA Operations Reports.

11. All payments due to FCIC must be deposited directly into the Corporation's account in the U.S. Treasury by EFT. An instruction guide for funds transfer deposit messages to the Treasury is provided in **Exhibit 7**. Information, such as agency codes, and beneficiary codes will be provided under separate cover.

## 12. Annual Operations Reports

- a. Hard copy settlement report, called the Annual Operations Report (recap and worksheets), must be received by RMA by the last business day of October following the end of the subsequent reinsurance year per SRA Section I. **The** report will follow the format as provided in **Exhibit 1-4** of this Appendix. All reinsurance transactions for the year must be summarized and reported on the Annual Operations Report.
- b. Corresponding data file transmissions for the Annual Operations Report must be successfully received in its entirety by the October monthly transaction cutoffs stated in 11.a above. The amount due either FCIC or the AIP will be calculated based on the PASS validation of the data, will be based on the RMA-generated Operations Report, and will follow the monthly reporting process.
- c. The gain or loss of the AIP is calculated in the monthly Reinsurance Run Report generated by RMA. Any underwriting gain will be paid on the Annual Operations Report. Underwriting loss will be calculated on the Monthly Operations Report. If the underwriting loss netted with any other amounts due results in a net amount due FCIC, payment must be received by EFT by the AIP Payment Date.

## **22      Accounting Reports**

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RMA provides AIPs the following reports:

P/CR Memo Reject Report ( <b>Exhibit 1-10</b> )	This report lists all policy record amounts that contain generated P/CR Memo amounts which were not posted. P/CR Memo amounts are rejected when the P/CR Memo policy does not exist or when the P/CR Memo policy has zero premium.
	Reconciliation reports are generated in addition to the various error reports whenever there are unusual circumstances concerning a policy or record type submitted. The purpose of these reports is to perform a verification or validation of data on RMA's database to the most current data received from the AIP. The AIP should research data appearing on the reconciliation reports and determine what action needs to be taken to correct the discrepancies (i.e., delete, correct, in order to resubmit the records correctly). The amount of negative financial impact to FCIC will be determined and deducted from the Monthly/Annual Operations Report. Following are the two reconciliation reports the AIP may receive:  Discrepancies of Premium by Policy Discrepancies of Losses by Policy

Reconciliation Reports ( <b>Exhibit 4</b> )	The Discrepancy reports, are generated when a policy record that has been submitted by an AIP does not agree with data accepted into the PASS.
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## RAS Summary Reports

The RAS generates summary reports based on detailed reinsured contract data submitted by the AIPs each month through PASS. Once data is received from AIPs electronically, the PASS processes the data through RMA edits/validations and RAS produces the summary reports. The reports are used to calculate the balance which is due the AIP or FCIC. The FCIC Detailed Policy Report shows detail policy-level information. It feeds information to the Operations Report which generates grand totals, and consists of the following:

Premium	The Premium grand total is developed from the Premium Lines Record - Type 11 and 13, and is reported as summarized policy detail for all lines and all crops associated with a policy. Premium is totaled by Crop Year.
Paid	<p>The Paid grand total is developed from the Payment Record - Type 12 (Payment Type 00) and the RAS currently shows policy detail for the net paid amount. The paid amount should not include administrative fees and must be <math>\geq</math> zero.</p> <p>The net paid represents the premium collected by the AIP from the producer (insured). An overpaid amount may exist when a producer overpaid his premium.</p>
Loss-Credit	The Loss-Credit grand total is derived from the Loss Total Record Type 20, which consists of M-Memos and P-Credit Memos. M-Memos are premium amounts due (by producer) that have been deducted from a loss payment by the producer from losses received on the same policy. P-Credit Memos occur when premium due on another policy (in same reinsurance year) is designated with a "P" in the Type 20 record which enables the amount to be deducted from a loss payment on the policy incurring a loss.
	All other amounts designated in the "1st - 4th Total Amounts" on the Type 20 record appear as a single line item entitled "Loss Deductions (F, R, O)" on the Operations Report.
	RAS will generate the designated 'P-Credit Memos' into the Loss-Credit column of the Monthly Operations Reports to eliminate out-of-balance conditions.
	The sum of each loss deduction code for a policy should never be less than zero.
	An overpaid amount may exist when an excessive amount of an insured's loss was deducted from his policy.
Subsidy	The Subsidy grand total is the Total Premium minus the Producer Premium submitted on the Premium Lines Record - Type 11.
	The Loss grand total is derived from the Loss Line Record - Type 21 or 22, which consists of all losses reported by the AIP. The losses are reimbursed to the AIP through the automated escrow process. On a monthly/annual basis, the total of Total Losses will be compared to the sum of "Loss-cr., Escrow, and Drafts" and "Loss Deductions (F, R, O)" and FCIC will pay the lesser amount. RMA will also adjust the amount of "Drafts Issued (Escrow)" included in the Monthly/Annual



Losses	Summary Report on the line for "Loss-CR, Escrow and Drafts" to the lesser amount of "Previous Escrow Funded" or "Less Drafts Issued (Escrow)." This will avoid any potential overpayments by FCIC on the Monthly/Annual Summary Reports.
Cost Share	The total AGR or AGR-L Cost Share reported as additional subsidy.

### Monthly Operations Report (Exhibit 1)

This report shows the grand totals of all insurance policies carried by each AIP and provides the balance due the AIP or FCIC. The remainder of the entries on the Operations Report are calculated from entries which the AIP has made on the Premium Due and Premium Due Without Payments Worksheets or derived from other reports generated by RAS. Following is a description of each line item on the report. All line items represent cumulative totals.

Net Expense Reimbursement Adjustment	This item represents administrative expense reimbursement based on a percentage of total premium on all non-CAT crop policies. This item also includes the CAT loss adjustment expense based on the total CAT premium. The net installment adjustment is supported by the FCIC Installment report. <b>Exhibit 1-2.</b>
Net Contingency Fund	Sales (LRR) Reduction, Late Filed Acreage Reduction, Excess Premium Penalty, Compliance Penalty and Agreement Termination Penalty
Less Premium Collected	Insured's premium collected by the AIP.
Escrow and Drafts	Escrow is the lesser of the "previous Escrow Funded" or the amount of "Drafts Issued (Escrow)" (See Items u, v)
	Drafts represents the amount paid by the AIP for losses paid to producers if the AIP is not participating in Escrow. It is determined from Type 20 records which contain a "D" for drafts.
Loss Deductions	(F, R, O) - Amounts reimbursed by the FCIC to the AIP for administrative fees (F), recovery of previous or subsequent year premium (R), or other (O) to include interest deduction amounts, which the AIP deducted from their loss reimbursement request
AIP Previous Payment	The cumulative amount of other payments received by FCIC via electronic transfer to Treasury by the AIP.
FCIC Interest Paid	The cumulative total of all interest paid to AIPs by FCIC for late payments, etc.
Adjustment due Company	Amount of reimbursement by FCIC to the company for litigation or other approved expenses. This amount has to be reviewed and approved by RSD
Administrative Fee Adjustment	Net fee due FCIC supported by supplemental administrative fee reports ( <b>Exhibit 1-5</b> ).
Reduction Due to Reconciliation Report Differences	Net reduction amount based on unreconciled differences from reconciliation reports that have a negative financial impact to FCIC.
FCIC Interest/Penalty	Represents interest or penalty assessed against the AIP
Adjustment Due FCIC	Any overpayments that FCIC has made to the AIP
FCIC Previous	Cumulative amount of all payments made to the AIP by FCIC for the current reinsurance



Payment	year
Escrow Funded	Represents the escrow amount the AIP has been funded. The total is summed up to the current cutoff date of the Monthly Operations Report.
Paid Previous Worksheets	Amounts paid to FCIC on previous worksheets
Underwriting Loss	Represents the loss taken from the "Reinsurance Run" report. This amount is a calculation of the AIP's loss based on entries made in the Appendix II, together with the Standard Reinsurance Agreement applicable to each respective Reinsurance Year. The report is a summation of reinsured data displayed the fund, state and national (grand total) levels.
Subtotal	Total of lines preceding this line from the FCIC Due/Paid Column on the report
Total from Current Worksheet	Represents the combined total from the Premium Due and Premium Due Without Payment Worksheets
Balance Due AIP (+), FCIC (-)	Total balance due the AIP or FCIC
Previous Escrow Funded	Represents the amount of escrow the AIP has been funded, and is reported here when FCIC issues the funds to the AIP. The total is summed up to the current cutoff date of the Monthly Operations Report
Less Drafts Issued (Escrow)	Represents the amount of checks issued to producers for losses, and is accumulated from a "E" that was validated and accepted in PASS from the type 20 record
Escrow Balance	Represents the difference between the "Previous Escrow Funded" line and the "Less Drafts Issued (Escrow)" line

### Annual Operations Report (Exhibit 1-4)

This report shows the grand totals of all insurance policies carried by each AIP and provides the balance due the AIP or FCIC. The following provides a description of how each line item on the Annual Operations Report is calculated. All line items represent cumulative totals.

Expense Reimbursement Adjustment	Represents administrative expense reimbursement based on a percentage of total premium on all non-CAT crop policies less the reduction for Late Reporting Reductions. The CAT loss adjustment expense which is based on the total CAT premium. The net installment adjustment is supported by the FCIC Installment report
Net Contingency Fund	Late Reporting Reduction, Late Filed Acreage Reduction, Excess Premium Penalty, Compliance Penalty and Agreement Termination Penalty
Less Premium Collected	Total premium whether or not collected by the AIP
Loss-CR, Escrow and Drafts	Escrow is the lesser of the "Previous Escrow Funded" or the amount of "Drafts Issued (Escrow)" (see items w, x). Loss Credits (M, P)
Loss Deductions (F, R, O)	Amounts reimbursed by the FCIC to the AIP for administrative fees (F), recovery of previous or subsequent year premium @, or other "O" to include interest deduction amounts, which the AIP deducted from their loss reimbursement request.

Subsidy	Cumulative amount of all risk subsidy
Additional Subsidy	
AIP Previous Payment	Cumulative amount of other payments received by FCIC via electronic transfer to the Treasury by the AIP
FCIC Interest Paid	Cumulative total of all interest paid to AIPs by FCIC for late payments, et.
Adjustments Due Company	Amount of reimbursement by FCIC to the company for litigation or other approved expense. This amount has to be reviewed and approved by RSD
Net Administrative Fee Adjustment	Net fee due FCIC supported by supplemental administrative fee reports.
Less Reduction Due to Reconciliation Report Differences	Net reduction amount based on unreconciled differences from reconciliation reports that have a negative financial impact to FCIC
FCIC Interest/Penalty	Represents interest or penalty assessed against the AIP
Adjustments due FCIC	Overpayments that FCIC has made to the AIP
FCIC Previous Payment	Cumulative amount of all payments made to the AIP by FCIC for the current reinsurance year
Escrow Funded	Represents the escrow amount the AIP has been funded
Paid Previous Worksheets	Cumulative interest from any worksheets
Underwriting Gain/Loss	Represents the gain/loss taken from the "Reinsurance Run" report. This amount is a calculation of the AIP's gain/loss based on entries made in the Appendix II, together with the Standard Reinsurance Agreement applicable to each respective Reinsurance Year. The report is a summation of reinsured data displayed at fund, state and national (grand total) level
Subtotal	Total of lines preceding this line from the FCIC Due/Paid Column of the operations report
Total from Current Worksheet	Normally, this item represents the total from the Premium Due Without Payments Worksheet; however, there is an exception for those companies which had deferred premium. <b>For those companies, on the 1<sup>st</sup> annual report</b> only, a Premium Due Worksheet calculating interest should also be included in this total.
Balance Due AIP (+) or FCIC (-)	The total balance due the AIP or FCIC
Escrow Funded	Represents the amount of escrow the AIP has been funded, and is reported here when FCIC issues the funds to the AIP. The total is same as "p" above.
Less Drafts Issued (Escrow)	Represents the amount of checks issued to producers for losses, and is accumulated from an "E" validated and accepted in PASS from the Type 20 record
Escrow Balance	Represents the difference between the "Escrow Funded" line and the "Less Drafts Issued (Escrow)" line

Summary reports are generated based on detailed reinsured contract data submitted by the AIPs each month through eDAS. The reports are used to calculate the balance which is due the AIP or FCIC.

Livestock Detail Report (LADR001)	Exhibit 9-2 shows detail policy-level information. It feeds information to the Livestock Operations Report, which generates grand totals, and will include the following for Livestock:
	The Premium Grand Total is developed from the Livestock Premium Data Identifier and is reported as summarized policy detail for all lines associated with a policy.
	The Subsidy Grand Total is developed from the subsidy information submitted on the Livestock Premium Data Identifier and is reported as summarized policy detail for all lines associated with a policy
	The Loss Grand Total is derived from the livestock Indemnity Data Identifier, which consists of all losses reported by the AIP
Monthly Livestock Operations Report (LRCP001)	Exhibit 9-1 shows the grand totals of all insurance policies carried by each AIP and provides the balance due the AIP or FCIC. Following is a description of how Livestock will be reflected on the Monthly Livestock Operations Report
Net A&O Subsidy	Administrative and Operating Subsidy per the LPRA
AIP Previous Payment	Cumulative amount of other payments received by FCIC via electronic transfer to Treasury by the AIP
FCIC Interest Paid	Cumulative total of all interest paid to AIPs by FCIC for late payments
Adjustments due Company	Litigation or other approved expense owed the AIP
FCIC Previous Payment	Cumulative total of all “Balance Due Company” amounts from all prior months reports
FCIC Interest/Penalty	Interest or Penalty assessed against the AIP
Adjustments Due FCIC	Offline (manual) corrections by the AIPs for overpaid indemnities
Livestock Settlement	Represents the livestock adjustments supported by the Livestock Settlement Report (Exhibit 9-3).
Balance Due Company/FCIC	Total balance due the AIP or FCIC

## **23**

### **Escrow Reconciliation**

#### **A. AIP Escrow Account Reconciliation must include the following information on a monthly basis:**

1. Bank Reconciliation consisting of reinsured company’s name, address, bank account number, escrow account ending balance, total amounts for items in-transit, outstanding, interest, and overage/shortage. The bank reconciliation must be submitted in PDF format, certified and signed by a company officer or other company designated management official. The bank reconciliation must also be submitted in an Excel file format along with the other templates.
2. Data files in an Excel zip file format (templates attached) that provide detail for the bank reconciliation, in-transit, outstanding checks, overage/shortage, voided checks, cleared checks, check registers and interest checks.
3. Bank Statement of AIP’s Loss-Clearing Account submitted in PDF format.
4. Bank Statement of RMA’s Escrow Account submitted in PDF format.

**B. The Excel zip file that is submitted to RMA must include the following eight tabs:**

1. Bank Reconciliation – AIP’s must provide a bank reconciliation that presents the balance per statement, escrow request in-transit totals listed by reinsurance year, total debits, outstanding checks total, interest payable to FCIC by month, total credits, and overage/shortage total.
2. In-transit – AIP’s must provide a list of checks issued, but awaiting deposit of funds from RMA.
3. Outstanding checks – AIP’s must provide a list of checks that have been issued, but have not been presented for payment. AIP’s must monitor their list of outstanding checks for stale-dated checks over one year and follow the procedures stated on the Informational Memorandum dated February 13, 2007, for processing checks over one year old. If an action has been taken to resolve a stale check, make a note on the template.
4. Overage/shortage – AIP’s must provide a list, review, and resolve all items listed as overage/shortage on a monthly basis. The company will have 2 banking cycles to reconcile and resolve any item listed as an overage or a shortage on the escrow reconciliation. AIP’s must provide a brief explanation of all items listed on the overage/shortage report. Any unsettled items will be resolved with RMA and the AIP.
5. Voided checks – AIP’s must provide a list of checks that were voided for the month of the reconciliation.
6. Cleared checks – AIP’s must provide a list of checks that have cleared the loss clearing account for the month of the reconciliation.
7. Check register – AIP’s must provide a list of checks that were issued for the month of the reconciliation.
8. Interest checks - Remit interest checks on a monthly basis for interest amounts exceeding \$10.00.
  - Interest accrued under \$10 should wait until interest accrued exceeds \$10.00 before sending to RMA. The total for each month must be provided on the interest tab.
  - Outstanding interest must be submitted on a yearly basis with the August reconciliation, even if the \$10.00 threshold is not met.

**C. The PDF zip file that is submitted to RMA must include the following data:**

1. Bank Statement of AIP’s Loss-Clearing Account.
2. Bank Statement of RMA’s Escrow Account.
3. Bank Reconciliation certified and signed by a company officer or other company designated management official.

**D. All documents must be submitted electronically.**

1. A naming convention consisting of the approved insurance provider code, BNKREC, calendar year, calendar month, underscore, number one (if you have more than one account, you will use number two for the second account) followed by .zip. If you have more than one account, RMA will designate which account is number one and which account is number 2. Example: XXBNKREC0907\_1.ZIP (XXcompany, Bank Reconciliation, 2009, July, account 1).
2. Template formats provided on the attached sample reconciliation must be followed when submitting the escrow bank reconciliation.
3. Connect to the kcsn204.fcic.usda.gov. You will put your files here. When the process runs to collect the input file(s), it will then move the file from your home directory, perform a few tests on it and then it will put a copy of it in both the correct directory on the rmkc00a and in the correct upload directory on the kcsn204.

**E. Failure to follow above procedures will result in RMA initiating a series of notification letters from RMA to the AIPs.**

1. The first letter notifying the AIP accounting staff of the issue.
2. The second letter will be notification to AIP management.
3. The third letter will result in a notification letter to RSD for appropriate sanctions.
  - Discuss closing the current account and establishing a new account.

**F. Available tools:**

1. RMA is providing a daily and weekly escrow file to AIP's on the RO Server. These files can be used to assist AIP's in their reconciliation process.
2. When using the daily file, be aware that the information on the file will reflect the information that has been submitted to RMA. The raw data file may reflect duplication due to voided and reissued checks being submitted to RMA for a particular claim. One remedy to this situation is deleting the claim on one day and resubmitting correct draft numbers for the following day.

## **24 Application of Paid and Loss Credits**

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The application of paid and loss-credits is best demonstrated with the following examples:

- A. The Loss Credit must initially be applied to the Policy and crop with the associated Claim
- a) First - Unpaid Finance Charge for the crop (i.e. Interest), then
  - b) Unpaid Administrative Fee for the crop, then
  - c) Unpaid Premium for the crop

- B. After the Loss Credit has been applied to the Policy and Crop with the associated Claim then proceed in the following manner:
1. Apply to the same policy, any crop, starting with the earliest Premium Bill date –
    - a. First - Unpaid Finance Charge (i.e. Interest) , then  
(Note: if multiple crops have the same bill date, apply to interest on all crops before proceeding)
    - b. Unpaid Administrative Fee, then  
(Note: if multiple crops have the same bill date, apply to administrative Fee on all crops before proceeding)
    - c. Unpaid Premium
- C. After the Loss Credit has been applied to the same Policy and all Billed crops then it can be applied in following manner:
1. Apply to any related policy, any crop, starting with the earliest Premium Billed date –
    - a. Unpaid Finance charge (i.e. Interest)
    - b. Unpaid Bill Administrative Fee
    - c. Unpaid Bill Premium

**Georgia Policy Example Below:**

Example #1

07/15/09 - \$180.00 Loss on Policy # 1 Wheat

	Policy 1 – Wheat	Policy 1 – Oats	Policy 2 – Wheat	Policy 3 - Corn
Unpaid Interest				
Unpaid Fees	30.00	30.00	30.00	30.00
Unpaid Premium	100.00	120.00	165.00	230.00
Bill Date	7/1/2009	7/1/2009	7/1/2009	10/1/2009

1. Apply \$30 to fees on Policy #1-Wheat, and \$100 to Premium on Policy #1-Wheat
2. Apply the remaining Loss Credit to Policy #1-Oats – \$30 Fees, and \$20 to Premium

Example #2

09/15/09 - \$600.00 Loss on Policy # 1-Wheat

	Policy 1 – Wheat	Policy 2- Oats	Policy 2 – Wheat	Policy 3 – Corn
Unpaid Interest	3.25	3.75	4.88	-
Unpaid Fees	30.00	30.00	30.00	30.00

Unpaid Premium	100.00	120.00	165.00	230.00
Bill Date	7/1/2009	7/1/2009	7/1/2009	10/1/2009

1. Apply \$3.25 to interest on Policy #1-Wheat, \$30 to fees on Policy #1-Wheat, and \$100 to Premium on Policy #1-Wheat
2. Apply the remaining Loss Credit to Policy #1-Oats – \$3.75 Interest, \$30 Fees, \$120 Premium
3. Apply the remaining Loss Credit to Policy #2-Wheat - \$4.88 Interest, \$30 Fees, \$165 Premium
4. Apply the remaining Loss Credit to Policy #3-Corn - \$30 Fees, \$83.12 Premium

Note: Each example is independent of the other.

## 25 **Full Book Reconciliation**

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- A. On a daily basis, the AIP will submit Premium and Loss Records to PASS. PASS will calculate Premium, Loss, and A&O subsidy reimbursement. The PASS-calculated values will be returned to the AIP for each crop policy along with the AIP-calculated values which will be used as the discrepancy notice to the AIP. If discrepancies are not resolved prior to accounting cutoff, PASS-calculated values will be the data of record and recon reduction amounts will be deducted from the operations report (See Exhibit 4-1).
- B. PASS Premium Calculation by Policy:
  1. If a lower amount of premium is submitted by the AIP in comparison to the PASS-calculated amount of premium, RMA will deduct the net difference in A&O subsidy reimbursement on non-CAT coverage policies and/or Loss Adjustment Expense on CAT coverage policies and report deduction on the recon reduction line of the operations report (See Exhibit 4-2).
  2. If a higher amount of premium is submitted by the AIP in comparison to the PASS-calculated amount of premium, no reduction will be calculated.
- C. PASS Loss Calculation by Policy:
  1. If a lower amount of loss is submitted by the AIP in comparison to the PASS-calculated amount of loss, no reduction will be calculated.
  2. If a higher amount of loss is submitted by the AIP in comparison to the PASS-calculated amount of loss, the difference is calculated and a deduction is reported on the recon reduction line of the monthly operations report (See Exhibit 4-3).
- D. Beginning with annual settlement until data processing has ceased for the respective reinsurance year, the AIP will submit to PASS a Summary Book of Business (SBOB) by State Level containing premium, subsidy, and loss. PASS will compare the SBOB information to the PASS-calculated premium, subsidy, and loss values (See Exhibit 4-1).

E. Premium SBOB by State Calculation:

1. If a lower amount of premium is submitted by the AIP on their SBOB in comparison to the RMA-stored amount of premium, no action will be taken.
2. If a higher amount of premium is submitted by the AIP on their SBOB in comparison to the RMA-stored amount of premium, the difference in producer premium (premium-subsidy) minus the A&O subsidy reimbursement on non-CAT coverage policies and/or Loss Adjustment Expense on CAT coverage policies will be deducted and reported on the recon reduction line of the monthly operations report beginning with the Annual Settlement cutoff date for the respective reinsurance year (See Exhibit 4-4).

F. Loss SBOB by State Calculation:

1. If a lower amount of losses is submitted by the AIP on their SBOB in comparison to the RMA-stored amount of losses, the difference is calculated and a deduction is reported on the recon reduction line of the operations report (See Exhibit 4-5).
2. If a higher amount of losses is submitted by the AIP on their SBOB in comparison to the RMA-stored amount of losses, no reduction will be calculated.



Example of PASS Process:

**Premium**

AIP Submission	PASS - Calculation	Recon Reduction Impact	Recon Reduction Comments <sup>1</sup>
		Non-CAT Policy \$ 50 CAT Policy \$12	Net Financial Impact: Assumed 25% A&O Reimbursement for non-CAT policies and 6% Loss Adjustment Expense for CAT policies
\$800	\$1,000		
\$1,000	\$800	\$0	No Impact

**Loss**

AIP Amount	PASS - Calculation	Recon Reduction Impact	Recon Reduction Comments
\$500	\$600	\$0	No Impact
\$600	\$500	\$100	Loss Difference included in Recon Reduction

Example of SBOB Process:

**Premium**

AIP Amount	PASS - Calculation	Recon Reduction Impact	Recon Reduction Comments
\$3,200	\$4,000	\$0	No Impact
		Non-CAT Policy \$360 CAT Policy \$48	Net Financial Impact: Assumed 25% A&O Reimbursement and 30% Producer Subsidy for non-CAT policies and 6% Loss Adjustment Expense for CAT policies
\$4,000	\$3,200		

**Loss**

AIP Amount	PASS - Calculation	Recon Reduction Impact	Recon Reduction Comments
\$2,000	\$2,400	\$400	Loss Difference
\$2,400	\$2,000	\$0	No Impact

<sup>1</sup> The actual average amount of expense reimbursement or CAT LAE will be based on calculated values from the individual AIP accounting Report for the month(s) in which the reduction applies.

FCIC OPERATIONS REPORT  
 REINSURANCE YEAR - YYYY MONTHLY  
 RO XX  
 Reinsured Company Name  
 C/O MGA  
 RCP001-C  
 PAGE: 1

CURRENT DATE: MM/DD/YYYY HH.MM.SS CUTOFF DATE: MM/DD/YYYY

	PREMIUM	PAID	LOSS-CR	SUBSIDY	LOSSES	ADDT SUBSIDY
GROUP RISK	0	.00	0	0	0	0
REVENUE HARV. OPT.	0	.00	0	0	0	0
OTHER	0	.00	0	0	0	0
TOTAL NON CAT	0	.00	0	0	0	0
CAT	0			0	0	

(L/R = .0000 )		DUE COMPANY	DUE FCIC
a.NET EXPENSE REIMBURSEMENT	.00		
b.NET CONTINGENCY FUND			.00
c.PREMIUM COLLECTED	.00		.00
d.ESCROW AND DRAFTS		.00	.00
e.LOSS DEDUCTIONS (F,R,O)	.00	.00	.00
f.STATE SUBSIDY			.00
g.COMPANY PREVIOUS PAYMENT			.00
h.FCIC INTEREST PAID			.00
i.ADJUSTMENTS DUE COMPANY			.00
j.NET ADMINISTRATIVE FEE ADJUSTMENT			.00
k.REDUCTIONS DUE TO RECON REPORT DIFFERENCES			.00
l.FCIC INTEREST/PENALTY			.00
m.ADJUSTMENTS DUE FCIC			.00
n.FCIC PREVIOUS PAYMENT			.00
o.ESCROW FUNDED			.00
p.PAID PREVIOUS WORKSHEETS		.00	.00
q.UNDERWRITING LOSS		.00	.00
r.SUBTOTAL		.00	.00
s.TOTAL FROM CURRENT WORKSHEET		.00	.00
t.BALANCE DUE COMPANY/FCIC			.00

#### ESCROW REIMBURSEMENT

u.PREVIOUS ESCROW FUNDED	.00
v.LESS DRAFTS ISSUED (ESCROW)	.00
w.ESCROW BALANCE	.00

CERTIFIED CORRECT

NAME	TITLE	DATE
NOTE: ANY FALSE CERTIFICATION MADE TO THE CORPORATION MAY SUBJECT THE MAKER TO CRIMINAL AND CIVIL PENALTIES AS PROVIDED IN 18 U.S.C. 287,1001; 31 U.S.C. 3729 AND 3730		

RO XX  
Reinsured Company Name  
C/O MGA

FCIC INSTALLMENT REPORT  
REINSURANCE YEAR - YYYY

PAGE: 1  
INS001

CURRENT DATE: MM/DD/YYYY HH.MM.SS CUTOFF DATE: MM/DD/YYYY

	PREMIUM	PAID	LOSS-CR	SUBSIDY	LOSSES	ADDT SUBSIDY
GROUP RISK	0	.00	0	0	0	0
REVENUE HARV. OPT.	0	.00	0	0	0	0
OTHER	0	.00	0	0	0	0
TOTAL NON CAT	0	.00	0	0	0	0
CAT	0			0	0	

DUE COMPANY

ADMINISTRATIVE AND OPERATING SUBSIDY

GROUP RISK			
GRF/GRIP			
(SRA REIMB RATE 12.0%) - 75% COVERAGE LEVEL	9,999,999	.00	
(SRA REIMB RATE 12.0%) - 80% COVERAGE LEVEL	9,999,999	.00	
(SRA REIMB RATE 12.0%) - 85% COVERAGE LEVEL	9,999,999	.00	
PRF			
(SRA REIMB RATE 20.1%) - 75% COVERAGE LEVEL	9,999,999	.00	
(SRA REIMB RATE 17.8%) - 80% COVERAGE LEVEL	9,999,999	.00	
(SRA REIMB RATE 17.1%) - 85% COVERAGE LEVEL	9,999,999	.00	
TOTAL GROUP RISK			.00
REVENUE HARV. OPT.			
(SRA REIMB RATE 18.5%) - 75% COVERAGE LEVEL	9,999,999	.00	
(SRA REIMB RATE 16.4%) - 80% COVERAGE LEVEL	9,999,999	.00	
(SRA REIMB RATE 15.8%) - 85% COVERAGE LEVEL	9,999,999	.00	
TOTAL REVENUE			.00
OTHER			
(SRA REIMB RATE 21.9%) - 75% COVERAGE LEVEL	9,999,999	.00	
(SRA REIMB RATE 19.4%) - 80% COVERAGE LEVEL	9,999,999	.00	
(SRA REIMB RATE 18.7%) - 85% COVERAGE LEVEL	9,999,999	.00	
TOTAL OTHER			.00
TOTAL ADMINISTRATIVE AND OPERATING SUBSIDY			.00
CAT LOSS ADJUSTMENT (6.0%)	9,999,999		.00
NET EXPENSE REIMBURSEMENT			.00

RO XX  
Reinsured Company Name  
C/O MGA

FCIC STATE REIMBURSEMENT REPORT  
REINSURANCE YEAR - YYYY

PAGE: 1  
INS002

CURRENT DATE: MM/DD/YYYY HH.MM.SS CUTOFF DATE: MM/DD/YYYY

ST	RATE CHG	PLAN GROUP	INS PLAN	COV LVL	REIMBURSE RATE	TOTAL PREMIUM	REIMBURSEMENT AMOUNT
AL	Y	CAT	41	.5000	.06000	999,999	9,999.99
			86	.5000	.06000	999,999	9,999.99
			90	.5000	.06000	999,999	9,999.99
		GRP	73	.9000	.12000	999,999	9,999.99
		OTH	41	.5000	.23050	999,999	9,999.99
			86	.5000	.23050	999,999	9,999.99
				.7500	.23050	999,999	9,999.99
			90	.5000	.23050	999,999	9,999.99
				.7500	.23050	999,999	9,999.99
				.8500	.19850	999,999	9,999.99
		REV	44	.5000	.19650	999,999	9,999.99
				.7000	.19650	999,999	9,999.99
				.7500	.19650	999,999	9,999.99
*TOTAL STATE AL						9,999,999	99,999.99
WY	N	CAT	41	.5000	.06000	999,999	9,999.99
			86	.5000	.06000	999,999	9,999.99
			90	.5000	.06000	999,999	9,999.99
		GRP	73	.9000	.12000	999,999	9,999.99
		OTH	41	.5000	.21900	999,999	9,999.99
			86	.5000	.21900	999,999	9,999.99
				.7500	.19400	999,999	9,999.99
			90	.5000	.21900	999,999	9,999.99
				.7500	.19400	999,999	9,999.99
				.8500	.18700	999,999	9,999.99
		REV	44	.5000	.18500	999,999	9,999.99
				.8000	.16400	999,999	9,999.99
				.9000	.15800	999,999	9,999.99
*TOTAL STATE WY						9,999,999	99,999.99
TOTAL						99,999,999	999,999.99

RO XX	FCIC OPERATIONS REPORT	PAGE: 1
Reinsured Company Name	REINSURANCE YEAR - YYYY	RCP002-C
C/O MGA	ANNUAL	

CURRENT DATE: MM/DD/YYYY HH.MM.SS CUTOFF DATE: MM/DD/YYYY

	PREMIUM	PAID	LOSS-CR	SUBSIDY	LOSSES	ADDT SUBSIDY
GROUP RISK	0	.00	0	0	0	0
REVENUE HARV. OPT.	0	.00	0	0	0	0
OTHER	0	.00	0	0	0	0
TOTAL NON CAT	0	.00	0	0	0	0
CAT	0			0	0	

(L/R = .0000 )	DUE COMPANY	DUE FCIC
a.NET EXPENSE REIMBURSEMENT ADJUSTMENT	.00	
b.NET CONTINGENCY FUND		.00
c.PREMIUM COLLECTED		.00
d.LOSS-CR, ESCROW, AND DRAFTS	.00	
e.LOSS DEDUCTIONS (F,R,O)	.00	
f.STATE SUBSIDY		.00
g.SUBSIDY		.00
h.ADDITIONAL SUBSIDY		.00
i.COMPANY PREVIOUS PAYMENT		.00
j.FCIC INTEREST PAID		.00
k.ADJUSTMENTS DUE COMPANY	.00	
l.NET ADMINISTRATIVE FEE ADJUSTMENT		.00
m.REDUCTIONS DUE TO RECON REPORT DIFFERENCES		.00
n.FCIC INTEREST/PENALTY		.00
o.ADJUSTMENTS DUE FCIC		.00
p.FCIC PREVIOUS PAYMENT		.00
q.ESCROW FUNDED		.00
r.PAID PREVIOUS WORKSHEETS	.00	.00
s.UNDERWRITING GAIN/LOSS	.00	.00
t.SUBTOTAL	.00	.00
u.TOTAL FROM CURRENT WORKSHEET	.00	.00
v.BALANCE DUE COMPANY/FCIC	.00	.00

#### ESCROW REIMBURSEMENT

w.PREVIOUS ESCROW FUNDED	.00
x.LESS DRAFTS ISSUED (ESCROW)	.00
y.ESCROW BALANCE	.00

CERTIFIED CORRECT

NAME	TITLE	DATE
NOTE: ANY FALSE CERTIFICATION MADE TO THE CORPORATION MAY SUBJECT THE MAKER TO CRIMINAL AND CIVIL PENALTIES AS PROVIDED IN 18 U.S.C. 287,1001; 31 U.S.C. 3729 AND 3730		

FCIC ADMINISTRATIVE FEE REPORT  
RO XX REINSURANCE YEAR YYYY FEE002  
REINSURANCE COMPANY NAME (MONTHLY)  
C/O MGA

CURRENT DATE: MM/DD/YYYY HH.MM.SS CUTOFF DATE: MM/DD/YYYY

=====

CAT FEES DUE FCIC	9,900.00
ADDITIONAL COVERAGE FEES COLLECTED	.00
LESS COMPANY CAT FEES REDUCTION	<u>1,000.00</u>
ADMINISTATIVE FEES DUE FCIC	8,900.00

FCIC ACCOUNTING DETAIL REPORT (EXCLUDING CAT)                      ADR001  
 RO XX                      REINSURANCE YEAR YYYY  
 REINSURANCE COMPANY NAME                      MONTHLY  
 C/O MGA

CURRENT DATE: MM/DD/YYYY    HH.MM.SS    CUTOFF DATE: MM/DD/YYYY

ST	CO	POL #	YR	NAME	(NOTES)	PREMIUM	PAID	LOSS-CR	SUBSIDY	CLEARED LOSSES	ADDT SUBSIDY
XX	999	999999	YYYY	DOE, JOHN	*	9,999	9,999	999	9,999	999	99
XX	999	999999	YYYY	DOE, JOHN	*	9,999	9,999	999	9,999	999	99
XX	999	999999	YYYY	DOE, JOHN	*	9,999	9,999	999	9,999	999	99
XX	999	999999	YYYY	DOE, JOHN	*	9,999	9,999	999	9,999	999	99
XX	999	999999	YYYY	DOE, JOHN	*	9,999	9,999	999	9,999	999	99
XX	999	999999	YYYY	DOE, JANE	*	9,999	9,999	999	9,999	999	99
XX	999	999999	YYYY	DOE, JANE	*	9,999	9,999	999	9,999	999	99
XX	999	999999	YYYY	DOE, JANE	*	9,999	9,999	999	9,999	999	99
XX	999	999999	YYYY	DOE, JANE	*	9,999	9,999	999	9,999	999	99
XX	999	999999	YYYY	DOE, JANE	*	9,999	9,999	999	9,999	999	99
XX	999	999999	YYYY	DOE, JANE	*	9,999	9,999	999	9,999	999	99
TOTAL						9,999	9,999	999	9,999	9,999	99

\*\*\* NOTES \*\*\*

(\*) - RESIDUAL FUND                      (V) - OVERPAID  
 (P) - PAYMENT CR MEMO                      (E) - ESCROW

RO XX	FCIC ACCOUNTING DETAIL REPORT (EXCLUDING CAT	ADR002
	REINSURANCE YEAR YYYY	
REINSURANCE COMPANY NAME	STATE TOTALS	
C/O MGA		

CURRENT DATE: MM/DD/YYYY HH.MM.SS CUTOFF DATE: MM/DD/YYYY

ST	PREMIUM	PAIDS	LOSS-CR	SUBSIDY	CLEARED LOSSES	ADDT SUBSIDY
CO	99,999	0.00	0	99,999	0	0
KS	99,999	0.00	0	99,999	0	0
NE	99,999	0.00	0	99,999	0	0
TX	99,999	0.00	0	99,999	0	0
TOTAL	999,999	0.00	0	999,999	0	0



FCIC DETAIL REPORT (EXCLUDING CAT) ADR003  
 RO XX REINSURANCE YEAR - YYYY  
 REINSURANCE COMPANY NAME GRAND TOTALS  
 C/O MGA

CURRENT DATE: MM/DD/YYYY HH.MM.SS CUTOFF DATE: MM/DD/YYYY

CROP YR	PREMIUM	PAIDS	LOSS-CR	SUBSIDY	CLEARED LOSSES	ADDT SUBSIDY
YYYY (-1)	9,999,999	99,999.99	0	9,999,999	0	0
YYYY	99,999,999	999,999.99	0	99,999,999		
YYYY (+1)	99,999	9.99	0	99,999		
TOTALS	99,999,999	999,999.99	0	99,999,999	0	0
OVERPAIDS		999.99	0			
GRAND TOTALS LESS OVERPAIDS	99,999,999	999,999.99	0	99,999,999	0	0
		PMEMO	999,999			
		MMEMO	999,999			
		PLCR	999,999			

FCIC DETAIL OVERPAIDS REPORT (EXCLUDING CAT)                      ADR004  
 RO XX                      REINSURANCE YEAR - YYYY  
 REINSURANCE COMPANY NAME                      OVERPAID POLICIES  
 C/O MGA

CURRENT DATE: MM/DD/YYYY    HH.MM.SS    CUTOFF DATE : MM/DD/YYYY

ST	CO	POLICY	YR	PREMIUM	PAIDS	LOSS CR	SUBSIDY	CLEARED LOSSES	ADDT SUBSIDY	OVER PAID	OVER LOSS-CR
AL	999	99999999	YYYY	9,999	9,999.99	999.99	999.99	999.99	9.99	99.99	9.99
*TOTAL STATE AL				9,999	9,999.99	999.99	999.99	999.99	9.99	99.99	9.99
AR	999	99999999	YYYY	9,999	9,999.99	999.99	999.99	999.99	9.99	99.99	9.99
*TOTAL STATE AR				9,999	9,999.99	999.99	999.99	999.99	9.99	99.99	9.99
TOTAL				9,999	9,999.00	999.99	999.99	999.99	9.99	99.99	9.99

RO XX

REINSURANCE COMPANY NAME

C/O MGA

P/CR MEMO REJECT LISTING

REINSURANCE YEAR - YYYY

PCR001

CURRENT DATE: MM/DD/YYYY

CUTOFF DATE: MM/DD/YYYY

MEMO RO	MEMO LOC ST	MEMO CNO	MEMO POLICY NO	CROP YR	PMEMO AMOUNT	SOURCE RO	SOURCE ST	SOURCE CNO	SOURCE POLICY NO
XX	NE	999	999999	YYYY	999.00	XX	31	999	99999999
	PE	999	999999	YYYY	9,999.00	XX	42	999	99999999
	PE	999	999999	YYYY	9,999.00	XX	42	999	99999999
			999999	YYYY	99.00	XX	19	999	99999999
			999999	YYYY	9,999.00	XX	42	999	99999999
TOTAL					99,999.00				

EXAMPLE 1:

INTEREST CALCULATIONS ON LATE ACCOUNTING REPORT PAYMENTS

<u>REPORT DATE</u>	<u>REPORT DUE</u>	<u>DAYS RECEIVED</u>	<u>LATE</u>	<u>INTEREST RATE</u>	<u>NOTE AMOUNT</u>	<u>REF.</u>
05/08/YYYY	05/29/YYYY	\$100,000	4	15%	\$164.38	1
11/06/YYYY	11/30/YYYY	\$1,000,000	7	15%	\$2,876.71	2

1. Payment of the \$100,000 balance due FCIC on the 05/08/YYYY report, due on 05/29/YYYY, the last banking day of the month, is received on 06/02/YYYY.
2. Payment of the \$1,000,000 balance due FCIC on the 11/06/YYYY report, due on 11/30/YYYY, the last banking day in the month, is received on 12/07/YYYY.

EXAMPLE 2:

INTEREST CALCULATIONS ON OVERPAID INDEMNITIES/UNDERSTATED PREMIUM CASES IDENTIFIED THROUGH REVIEW

<u>FINAL FINDINGS LETTER</u>	<u>OVERPAYMENT AMOUNT</u>	<u>DATE OF APPEAL</u>	<u>APPEAL LETTER DATE</u>	<u>ACCOUNTING REPORT DATE</u>	<u>DAYS</u>	<u>INTEREST RATE</u>	<u>INTEREST DUE</u>	<u>NOTE REF</u>
1/20/YYYY	\$10,000	N/A	N/A	02/09/YYYY	26	15%	0.00	1
1/20/YYYY	\$15,000	N/A	N/A	04/09/YYYY	100	15%	\$616.44	2
1/20/YYYY	\$20,000	2/15/YYYY	11/28/YYYY	12/11/YYYY	345	15%	\$2,835.62	3

1. The Company is notified of an overpayment in a Final Findings by the Regional Compliance Offices letter dated January 20, YYYY. The February 9, YYYY report containing the correction was filed timely. Since the report was corrected within 30 days, interest does not attach.
2. The Company is notified of an overpayment amount in a Final Findings by the Regional Compliance Offices letter dated January 20, YYYY. The amount is to be corrected on the February 9, YYYY report. No appeal is filed. No corrections are made until the April 9, YYYY report. Interest is calculated starting with the day after the Final Findings by the Regional Compliance Offices letter which is January 21, YYYY through the due date of the certified report containing the corrections is submitted, which is April 30, YYYY.
3. Interest begins accruing based on the date of the Final Findings by the Regional Compliance Offices letter. **Appeals have no affect on delaying the interest computation date.** In this example, the company is notified of an overpayment in a Final Findings by the Regional Compliance Offices letter dated January 20, YYYY. The company files an appeal on February 15, YYYY. The appeal is heard and FCIC receives a favorable decision. Had the company received a favorable decision, no interest is due. The Company is notified by an Appeal Determination letter on November 28, YYYY of the amount due FCIC. Interest is calculated starting with the day after the Final Findings by the Regional Compliance Offices letter, which is January 21, YYYY through the due date of the certified report containing the correction is submitted, which is December 31, YYYY.

CAT COVERAGE FEES (EXCLUDING BUY-UPS) CFE001  
 RO XX REINSURED COMPANY DETAIL REPORT  
 REINSURANCE COMPANY NAME REINSURANCE YEAR YYYY  
 C/O MGA MONTHLY

CURRENT DATE: MM/DD/YYYY HH.MM.SS CUTOFF DATE: MM/DD/YYYY

ID NUMBER	ST	CO	POLICY NUMBER	CROP YEAR	LOC CNTY	CROP CODE	TYPE	PRAC CODE	A R	ADM FEE	PREMIUM	LOSSES	FEES AMOUNT	FEES COLLECTED	FEES WAIVED
999999999	CA	999	999999	YYYY	999	0037		999	999	C	999		300		
999999999	IL	999	999999	YYYY	999	0011		997	999	C	999		300		
999999999	MO	999	999999	YYYY	999	0011		997	998	C	999		300		
999999999	MN	999	999999	YYYY	999	0033		997	998	C	9,999		300		
999999999	KS	999	999999	YYYY	999	0011		997	998	C	999		300		
999999999	MN	999	999999	YYYY	999	0033		997	998	C	999		300		
999999999	IL	999	999999	YYYY	999	0011		997	998	C	99		300		
999999999	IL	999	999999	YYYY	999	0011		997	998	C	9,999		300		
999999999	IL	999	999999	YYYY	999	0011		997	998	C	99		300		
999999999	OH	999	999999	YYYY	999	0011		997	998	A	99		300		
999999999	IL	999	999999	YYYY	999	0011		997	998	C	999		300		
999999999	IL	999	999999	YYYY	999	0011		997	998	A	999		300		
999999999	IN	999	999999	YYYY	999	0011		997	998	C	99		300		
999999999	IL	999	999999	YYYY	999	0011		997	998	A	999		300		
999999999	IL	999	999999	YYYY	999	0011		997	998	C	999		300		
999999999	IL	999	999999	YYYY	999	0011		997	998	C	999		300		
TOTAL											9,999		4,600		

\*\*\* NOTES \*\*\* YYYY Catastrophic Coverage Fees

The CAT Fee amount for all crops will be \$300.

CAT COVERAGE FEES  
 RO XX REINSURED COMPANY DETAIL REPORT  
 REINSURANCE COMPANY NAME REINSURANCE YEAR YYYY  
 C/O MGA

CFE002

DATE: MM/DD/YYYY HH.MM.SS CUTOFF DATE: MM/DD/YYYY

<u>ST</u>	<u>PREMIUM</u>	<u>LOSSES</u>	<u>FEE AMOUNT</u>	<u>FEES COLLECTED</u>	<u>FEES WAIVED</u>
AL	999,999		99,999	999	999
AR	999,999		99,999	999	999
AZ	999,999		99,999	999	999
CA	999,999		99,999	999	999
CO	999,999		99,999	999	999
CT	999,999		99,999	999	999
MO	999,999		99,999	999	999
MS	999,999		99,999	999	999
MT	999,999		99,999	999	999
NC	999,999		99,999	999	999
ND	999,999		99,999	999	999
NE	999,999		99,999	999	999
NJ	999,999		99,999	999	999
NM	999,999		99,999	999	999
NY	999,999		99,999	999	999
OH	999,999		99,999	999	999
OK	999,999		99,999	999	999
OR	999,999		99,999	999	999
PA	999,999		99,999	999	999
SC	999,999		99,999	999	999
YYYY (-1)	999,999	0	99,999	999	999
YYYY	99,999,999	0	99,999	99,999	9,999
YYYY (+1)	9,999,999	0	99,999	9,999	999
TOTAL	999,999,999	0	999,999	99,999	99,999

RO XX  
REINSURANCE COMPANY NAME  
C/O MGA

CAT COVERAGE FEES  
RECEIVABLE REPORT

REINSURANCE YEAR - YYYY

CURRENT DATE/TIME: MM/DD/YYYY HH:MM:SS CUTOFF DATE: MM/DD/YYYY

TAX ID	ID TYP PIC ST CNTY	POLICY NBR	CROP YEAR	CROP CODE	WRT OFF	COLL ID	FEE AMT	ADJ AMT	RET AMT	CHK	INT/PEN AMT	COLLECT AMT	BALANCE DUE	CO CAT FEE REDUCT AMT
999999999	9 999 99 999	999999999	YYYY	9999			300.00	.00	.00		.00	.00	300.00	300.00
TOTAL							300.00	.00	.00		.00	.00	300.00	300.00



CURRENT DATE/TIME: MM/DD/YYYY HH:MM:SS

CUTOFF DATE: MM/DD/YYYY

STATE	YYYY JAN	YYYY APR	YYYY MAY	YYYY JUN	YYYY JUL	YYYY AUG	YYYY SEP	YYYY OCT	YYYY NOV	YYYY DEC	YYYY +1 JAN	YYYY +1 MAR	PRE PAID	TOTAL
AR	0	0	0	0	0	0	0	0	0	0	0	0	0	0
GA	0	0	0	0	0	0	0	0	0	0	0	0	0	0
IA	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ID	0	0	0	0	0	0	0	0	0	0	0	0	0	0
IL	0	0	0	0	0	0	0	0	0	0	0	0	0	0
IN	0	0	0	0	0	0	0	0	0	0	0	0	0	0
KS	0	0	0	0	0	0	0	0	0	0	0	0	0	0
MI	0	0	0	0	0	0	0	0	0	0	0	0	0	0
MN	0	0	0	0	0	0	0	0	0	0	0	0	0	0
MO	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ND	0	0	0	0	0	0	0	0	0	0	0	0	0	0
NM	0	0	0	0	0	0	0	0	0	0	0	0	0	0
OH	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SD	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TX	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0
-----														
TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0
WAIVED	0	0	0	0	0	0	0	0	0	0	0	0	0	0
GRAND	0	0	0	0	0	0	0	0	0	0	0	0	0	0

RO XX  
 REINSURANCE COMPANY NAME  
 C/O MGA

FCIC REINSURANCE RUN  
 REINSURANCE YEAR YYYY

PAGE 1  
 REIPRT01

CURRENT DATE: MM/DD/YYYY HH.MM.SS CUTOFF DATE: MM/DD/YYYY

STATE AR	POOL	%	LIABILITY	PREMIUMS	LOSSES	LOSS RATIO
	COMMERCIAL	9.9	999,999	999,999	99,999	9.9
	SUBTOTAL 1		999,999	999,999	99,999	9.9
	COMMERCIAL Min. 25	9.9	999,999	999,999	99,999	9.9
	REVISED SUBTOTAL 1		999,999	999,999	99,999	9.9
	COMMERCIAL	9.9	999,999	999,999	99,999	9.9
	RETAINED SUBTOTAL 2		999,999	999,999	99,999	9.9
	COMMERCIAL Min. 35	9.9	999,999	999,999	99,999	9.9
	RETAINED SUBTOTAL 3		999,999	999,999	99,999	9.9
	COMMERCIAL	9.9		999,999	99,999	9.9
	SUBTOTAL 4			999,999	99,999	9.9
	COMMERCIAL GAIN/LOSS			999,999	(9,999)	
	STATE GAIN/LOSS			999,999	(9,999)	

(CONTINUED)

RO XX  
 REINSURANCE COMPANY NAME  
 C/O MGA

FCIC REINSURANCE RUN  
 REINSURANCE YEAR YYYY

PAGE 2  
 REIPRT01

CURRENT DATE: MM/DD/YYYY HH.MM.SS      CUTOFF DATE: MM/DD/YYYY

RO RECAP	POOL	%	LIABILITY	PREMIUMS	LOSSES	LOSS RATIO
	COMMERCIAL	9.9	999,999	999,999	99,999	9.9
	RESIDUAL	9.9	999,999	999,999	99,999	9.9
	SUBTOTAL 1		999,999	999,999	99,999	9.9
	COMMERCIAL	9.9	999,999	999,999	99,999	9.9
	RESIDUAL	9.9	999,999	999,999	99,999	9.9
	REVISED SUBTOTAL 1		999,999	999,999	99,999	9.9
	COMMERCIAL	9.9	999,999	999,999	99,999	9.9
	RESIDUAL	9.9	999,999	999,999	99,999	9.9
	RETAINED SUBTOTAL 2		999,999	999,999	99,999	9.9
	COMMERCIAL	9.9	999,999	999,999	99,999	9.9
	RESIDUAL	9.9	999,999	999,999	99,999	9.9
	RETAINED SUBTOTAL 3		999,999	999,999	99,999	9.9
	COMMERCIAL	9.9		999,999	99,999	9.9
	RESIDUAL	9.9		999,999	99,999	9.9
	SUBTOTAL 4			999,999	99,999	9.9

RO XX  
Reinsurance Company Name  
C/O MGA

FCIC REINSURANCE RUN  
REINSURANCE YEAR YYYY

PAGE 23  
REIPRT01

CURRENT DATE: MM/DD/YYYY HH.MM.SS

CUTOFF DATE: MM/DD/YYYY

RO RECAP	POOL	%	LIABILITY	PREMIUMS	LOSSES	LOSS RATIO
	COMMERCIAL GAIN/LOSS			9,999,999	(999,999)	
	RESIDUAL GAIN/LOSS			9,999,999	(999,999)	
	GROSS GAIN/LOSS			99,999,999	(9,999,999)	
	LESS QUOTA SHARE			9,999,999	(99,999)	
	GAIN/LOSS AFTER QUOTA SHARE			99,999,999	(9,999,999)	
	PAYOUT QUOTA SHARE			9,999,999	(9,999,999)	
	GAIN/LOSS			999,999,999	(99,999,999)	

RO XX  
Reinsurance Company Name  
C/O MGA

RECONCILIATION REDUCTION WORKSHEET  
REINSURANCE YEAR YYYY  
ANNUAL SETTLEMENT REPORT

Page: 1  
REC001

CURRENT DATE: MM/DD/YYYY HH.MM.SS      CUTOFF DATE: MM/DD/YYYY

Premium	
PASS Premium Discrepancy by Policy Level	72.00
SBOB Premium Discrepancy for Non-CAT	360.00
SBOB Premium Discrepancy for CAT	48.00
Total Premium Reduction	480.00
Loss	
PASS Loss Discrepancy by Policy Level	100.00
SBOB Loss Discrepancy	400.00
Total Loss Reduction	500.00
Total	
Total Recon Reduction	980.00

RO XX  
Reinsurance Company Name  
C/O MGA

RECONCILIATION REDUCTION WORKSHEET  
REINSURANCE YEAR YYYY  
PASS PREMIUM DISCREPANCY BY POLICY

Page: 1  
REC002

CURRENT DATE: MM/DD/YYYY HH.MM.SS      CUTOFF DATE: MM/DD/YYYY

RO	STATE	CO	POLICY	CROP YEAR	CROP CODE	INSURANCE PLAN	COVERAGE FLAG	A&O SUBSIDY REIMBURSEMENT	PASS CALCULATED PREMIUM	AIP SUBMITTED PREMIUM	DIFFERENCE	RECON REDUCTION
XX	XX	999	99999999	YYYY	9999	99	A	99.9%	99,999	99,999	999	99.99
XX	XX	999	99999999	YYYY	9999	99	C	99.9%	99,999	99,999	999	99.99
TOTAL PASS PREMIUM DISCREPANCY BY POLICY LEVEL												999.99

RO XX  
 Reinsurance Company Name  
 C/O MGA

RECONCILIATION REDUCTION WORKSHEET  
 REINSURANCE YEAR YYYY  
 SBOB PREMIUM DISCREPANCY

Page: 1  
 REC003

CURRENT DATE: MM/DD/YYYY HH.MM.SS      CUTOFF DATE: MM/DD/YYYY

RO	STATE	COVERAGE FLAG	A&O SUBSIDY REIMBURSEMENT	PASS CALCULATED PREMIUM	AIP 70 RECORD SUBMITTED PREMIUM	PASS CALCULATED SUBSIDY	AIP 70 RECORD SUBMITTED SUBSIDY	PRODUCER PREMIUM - (PREMIUM - SUBSIDY) DIFFERENCE	RECON REDUCTION
XX	XX	A	99.9%	999,999,999	99,999	999,999,999	99,999	999	99.99
SBOB PREMIUM DISCREPANCY FOR NON-CAT									<u>99.99</u>
XX	XX	C	99.9%	999,999,999	99,999	999,999,999	99,999	999	99.99
SBOB PEMIUM DISCREPANCY FOR CAT									<u>99.99</u>

RO XX  
Reinsurance Company Name  
C/O MGA

RECONCILIATION REDUCTION WORKSHEET  
REINSURANCE YEAR YYYY  
PASS LOSS DISCREPANCY BY POLICY

Page: 1  
REC004

CURRENT DATE: MM/DD/YYYY HH.MM.SS      CUTOFF DATE: MM/DD/YYYY

RO	STATE	CO	POLICY	CROP YEAR	CROP CODE	COVERAGE FLAG	PASS CALCULATED LOSS	AIP SUBMITTED LOSS	DIFFERENCE	RECON REDUCTION
XX	XX	999	99999999	YYYY	9999	A	99,999	99,999	999	999
XX	XX	999	99999999	YYYY	9999	C	99,999	99,999	999	999
TOTAL PASS LOSS DISCREPANCY BY POLICY LEVEL										9,999



RO XX  
Reinsurance Company Name  
C/O MGA

RECONCILIATION REDUCTION WORKSHEET  
REINSURANCE YEAR YYYY  
SBOB LOSS DISCREPANCY

Page: 1  
REC005

CURRENT DATE: MM/DD/YYYY HH.MM.SS      CUTOFF DATE: MM/DD/YYYY

		PASS CALCULATED LOSS	AIP 70 RECORD SUBMITTED LOSS	LOSS DIFFERENCE	RECON REDUCTION
RO	STATE				
XX	XX	999,999,999	99,999	999	999
SBOB LOSS DISCREPANCY					999

RO XX  
Reinsured Company Name  
C/O MGA

FCIC ADMINISTRATIVE REDUCTION REPORT  
FOR LATE REPORTED REDUCTION (LRR)  
REINSURANCE YEAR - YYYY

PAGE: 1

LRR002

CURRENT DATE: MM/DD/YYYY HH:MM:SS CUTOFF DATE: MM/DD/YYYY

RO	ST	NET BOOK PREMIUM	TOTAL REDUCTION
XX	XX	999,999	999,999.99
	XX	999,999	999,999.99
	XX	999,999	999,999.99
	XX	999,999	999,999.99

GRAND TOTALS	9,999,999	999,999.99
--------------	-----------	------------

TOTAL	1.0%	9,999.99
TOTAL	3.0%	9,999.99
TOTAL	6.0%	99,999.99
GRAND TOTAL		99,999.99

RO XX  
 Reinsured Company Name  
 C/O MGA

FCIC ADMINISTRATIVE REDUCTION REPORT  
 FOR LATE FILED ACREAGE REDUCTION (LFA)  
 REINSURANCE YEAR - YYYY

PAGE: 1  
 LFA002

CURRENT DATE: MM/DD/YYYY HH:MM:SS CUTOFF DATE: MM/DD/YYYY

RO ST		NET BOOK PREMIUM	TOTAL REDUCTION
XX	XX	999,999	999,999.99
	XX	999,999	999,999.99
	XX	999,999	999,999.99
	XX	999,999	999,999.99
GRAND TOTALS		9,999,999	999,999.99

TOTAL 1.5% (Weeks 7 - 9)	9,999.99
TOTAL 3.0% (Weeks 10 - 11)	9,999.99
TOTAL 4.5% (Weeks 12 or more)	99,999.99
GRAND TOTAL	99,999.99

RO XX  
Reinsured Company Name  
C/O MGA

FCIC ACCOUNTING REPORT  
PREMIUM DUE WORKSHEET  
REINSURANCE YEAR - YYYY

PAGE: 1  
PDW001-C

CURRENT DATE: MM/DD/YYYY HH.MM.SS

CUTOFF DATE: MM/DD/YYYY

		(A)	(B)	(C)	(D)	(E)	(F)	(G)
		INSURED	PREM PAID	PREM	PREV	NBR DAYS	INTEREST	TOTAL OF
		PREM DUE	BY CO.	UNPAID	MONTH	INTEREST	DUE	WORKSHEET
				(A-B)	UNPAID		(%) * (D) * (E)	(-B-F)
MONTH								
JANUARY	YYYY	99,999	_____	999	99	99	99.99	999.99
MARCH	YYYY	9,999	_____	99	99	99	99.99	999.99
MAY	YYYY	_____	_____	_____	_____	_____	_____	_____
JULY	YYYY	_____	_____	_____	_____	_____	_____	_____
OCTOBER	YYYY	_____	_____	_____	_____	_____	_____	_____
JANUARY	YYYY (+1)	_____	_____	_____	_____	_____	_____	_____
TOTAL		999,999						9,999.99

EXAMPLE 3:

PREMIUM DUE WITHOUT (W/O) PAYMENTS

PREMIUM PAYMENT DUE <u>DATE</u>	REPORT <u>DATE</u>	TOTAL PREMIUM <u>DUE W/O PMT.</u>	AMOUNT OF INCREASES IN PREMIUM FROM <u>PREVIOUS PEAK</u>	DAYS (365 DAY YR.) <u>(EXACT DAYS)</u>	INTEREST <u>RATE</u>	INTEREST <u>AMOUNT</u>	NOTE <u>REF.</u>
08/15/YYYY	09/10/YYYY	\$1,000,000	\$0	0	0	\$0.00	1
08/15/YYYY	10/31/YYYY	\$1,200,000	\$200,000	61	15%	\$5,013.70	2
08/15/YYYY	11/09/YYYY	\$1,300,000	\$100,000	91	15%	\$3,739.73	3
08/15/YYYY	01/08/YYYY(+1)	\$1,100,000	\$0	0	15%	\$0.00	4
08/15/YYYY	02/12/YYYY(+1)	\$1,400,000	\$100,000	179	15%	\$7,356.16	5

1. Total premium with an August billing date is due to FCIC on September 30.
2. Total premium with an August billing date due to FCIC September 30 has increased by \$200,000. The premium should have been reported on the September report. The company is charged for two full month's interest on the October report.
3. Total premium with an August billing date due to FCIC September 30 has increased by \$100,000 during November. The premium should have been reported on the September report. The company is charged three full month's interest on the November report.
4. The total premium reported did not increase during the month.
5. Total premium with an August billing date due to FCIC September 30 has further increased during the month by another \$100,000. The premium should have been reported on the September report. The company is charged six month's interest.

FCIC SUMMARY REPORT (MONTHLY)  
 PREMIUM DUE WITHOUT PAYMENTS WORKSHEET  
 REINSURANCE YEAR - YYYY

PDW002

RO XX  
 Reinsured Company Name  
 C/O MGA

CURRENT DATE: MM/DD/YYYY HH.MM.SS      CUTOFF DATE: MM/DD/YYYY

		(A)	(B)	(C)	(D)	(E)	(F)	(G)
		CURRENT	PREVIOUS	RPT DATE	INC OF PREM	NBR DAYS	INTEREST	TOTAL OF
		REPORT	PEAK	OF PEAK	DUE WO PAYM	INTEREST	DUE	INTEREST
MONTH								
JANUARY	YYYY	999	999	<u>MM/DD/YYY</u>	99	99	99.99	99.99
MARCH	YYYY	999	999	<u>MM/DD/YYY</u>	99	99	99.99	99.99
MAY	YYYY	_____	_____	_____	_____	_____	_____	_____
JULY	YYYY	_____	_____	_____	_____	_____	_____	_____
OCTOBER	YYYY	_____	_____	_____	_____	_____	_____	_____
JANUARY	YYYY (+1)	_____	_____	_____	_____	_____	_____	_____
TOTAL								999.99

EXAMPLE:4

PREMIUM DUE WORKSHEET - AUGUST PREMIUM DEFERRED (EXAMPLE SHOWING FLOW THROUGH 4 OPERATIONS REPORTS)

REPORT DATE	PREMIUM PAYMENT DUE DATE	(A) INS'DS PREMIUMPAID DUE	(B) PREM UNPAID BY CO.	(C) PREMIUM MONTH (A-B)	(D) PREVIOUS (365 DAY UNPAID	(E) DAYS YEAR)	(F) INTEREST DUE (%*D*E)	(G) TOTAL OF WORKSHEET (-B-F)	NOTE REF
09/DD/YYYY	AUGUST/YYYY	\$3,000,000	\$0	\$3,000,000	\$0	0	\$000	\$0.00	1
10/DD/YYYY	AUGUST/YYYY	\$2,200,000	\$0	\$2,200,000	\$3,000,000	61	\$75,205.48	\$75,205.48	2
11/DD/YYYY	AUGUST/YYYY	\$1,500,000	\$0	\$1,500,000	\$2,200,000	30	\$27,123.29	\$27,123.29	3
12/DD/YYYY	AUGUST/YYYY	\$750,000	\$0	\$750,000	\$1,500,000	31	\$19,109.59	\$19,109.59	4

1. Premium with an August billing date is deferred. No interest is due on this report.
2. Interest is charged on the \$3,000,000 of premium deferred the previous month (Column D at an annual rate of 15% for the period 09/01/YYYY through 10/31/YYYY.
3. Interest is charged on the \$2,200,000 of premium deferred the previous month (Column D) at an annual rate of 15% for the period 11/01/YYYY through 11/30/YYYY.
4. Interest is charged on the \$1,500,000 of premium deferred the previous month (Column D) at an annual rate of 15% for the period 12/01/YYYY through 12/31/YYYY.

Note: Once annual settlement is reached premium can no longer be deferred, all premium is due FCIC even if it remains uncollected.

EXAMPLE:5

PREMIUM DUE WORKSHEET - AUGUST PREMIUM PAID BY COMPANY

REPORT DATE	PREMIUM PAYMENT DUE DATE	(A) INS'DS PREMIUM DUE	(B) PREM PAID BY CO.	(C) PREMIUM UNPAID (A-B)	(D) PREVIOUS MONTH UNPAID	(E) DAYS (365 DAY YEAR)	(F) INTEREST DUE (%*D*E)	(G) TOTAL OF WORKSHEET (-B-F)	NOTE REF
09/DD/YYYY	AUGUST/YYYY	3,000,000	3,000,000	0	0	0	0	-3,000,000	1
10/DD/YYYY	AUGUST/YYYY	-2,000,000	-2,000,000	0	0	0	0	2,000,000	2
11/DD/YYYY	AUGUST/YYYY	-500,000	-500,000	0	0	0	0	500,000	3
10/DD/YYYY(+1)	AUGUST/YYYY								4

1. PREMIUM WITH AUGUST BILLING IS PAID BY COMPANY ON THE 09/DD/YYYY OPERATIONS REPORT.
2. COMPANY HAS MADE COLLECTIONS OF AUGUST PREMIUM WHICH ARE REFLECTED IN THE PAIDS ON THE OPERATIONS REPORT. THIS RESULTS IN A NEGATIVE PREMIUM DUE (COLUMN A).
3. COMPANY HAS MADE ADDITIONAL COLLECTIONS OF AUGUST PREMIUM.
4. FIRST ANNUAL OPERATIONS REPORT. All PREMIUM DUE EVEN IF NOT COLLECTED BY THE COMPANY. IF NO DEFERRALS, THERE WILL BE NO PREMIUM DUE WORKSHEET NECESSARY.



INSTRUCTION GUIDE FOR FUNDS TRANSFER  
DEPOSIT MESSAGES TO TREASURY

All Government agencies must provide specific information to their depositors so that a funds transfer deposit message can be transmitted to the Department of the Treasury (Treasury). Likewise, the depositors must communicate this information to the bank sending the funds transfer. The funds transfer deposit message format is included within this appendix. A narrative description of each field on the funds transfer deposit message follows:

<u>Field</u>	<u>Content</u>
--------------	----------------

- |   |  |
|---|--|
| 1 | RECEIVER-DFI# - The Treasury Department's ABA number for deposit-messages is 021030004. This number should be entered by the sending bank for all deposit messages sent to the Treasury.   |
| 2 | TYPE-SUBTYPE-CD - The type and subtype code will be provided by the sending bank.  |
| 3 | SENDER-DFI# - This number will be provided by the sending bank.  |
| 4 | SENDER-REF# - The sixteen character reference number is inserted by the sending bank at its option.  |
| 5 | AMOUNT - The transfer amount must be punctuated with commas and decimal point; use of the "\$" is optional. This item will be provided by the depositor.   |
| 6 | SENDER-DFI-NAME - This information is automatically inserted by the Federal Reserve Bank.  |
| 7 | RECEIVER-DFI-NAME - The Treasury Department's name for deposit messages is "TREAS NYC." This name should be entered by the sending bank.   |
| 8 | PRODUCT CODE - A product code of "CTR" for customer transfer should be the first data in the RECEIVER-TEXT field. Other values may be entered, if appropriate, using the ABA's options. A slash must be entered after the product code.  |
| 9 | AGENCY LOCATION CODE - THIS ITEM IS OF CRITICAL IMPORTANCE. IT MUST APPEAR ON THE FUNDS TRANSFER DEPOSIT MESSAGE IN THE PRECISE MANNER AS STATED TO ALLOW FOR THE AUTOMATED PROCESSING AND CLASSIFICATION OF THE FUNDS TRANSFER MESSAGE TO THE AGENCY LOCATION CODE OF THE APPROPRIATE AGENCY. The agency location code (ALC) refers to three-, four-, or eight-digit numeric symbols used to identify Government departments and agencies (e.g., accounting stations, disbursing and collecting offices). The agency's unique code must be specified in the funds transfer message in order for the funds to be correctly classified to the respective agency. The ALC identification sequence includes the beneficiary code field tag, BNF-, and identifier code,/AC-, followed by the appropriate ALC number. These three components must be in the following format: |

BNF-/AC-nnn	3-digit ALC	
		-OR-
BNF-/AC-nnnn	4-digit ALC	
		-OR-
BNF-/AC-nnnnnnnn	8-digit ALC	

The ALC identification sequence can, if necessary, begin on one line and end on the next line; however, the field tag "BNF-" must be one line and cannot contain any spaces.

- 10 THIRD PARTY INFORMATION - The appropriate information to identify the reason for the funds transfer should be provided by the agency to the depositor. The originator to Beneficiary Information field tag "OBI-" is used to signify the beginning of the free-form third party text. The field tag "OBI-" must be on the same line and cannot contain any spaces. The field tag is placed following the ALC identification sequence and preceded by a space. An example of this data line using the 8-digit ALC would be as follows:

BNF-/AC-nnnnnnnn OBI

It is important to note that the length of the third party text depends on how close you can place the ALC identification sequence (Field 9) to the PRODUCT CODE (Field 8). Under the Federal Reserve System's Structured Third Party Format, financial institutions have the ability to place additional information fields for their own use between field 8 and field 9. Agencies should instruct their depositors and financial institutions to limit the use of these additional fields, and attempt to adhere to the optimum format for fields 7, 8, 9, and 10. This format using an 8-digit ALC is as follows:

TREAS NYC/CTR/BNF-/AC-nnnnnnnn OBI-

The optimum format, shown above will allow 219 character positions of information following the "OBI-" indicator. The information that is constant for all agencies is shown in the Funds Transfer Deposit Message Format within this appendix. This includes the RECEIVER-DFI# (FIELD 1), the RECEIVER-DFI-NAME (FIELD 7) and the PRODUCT CODE (FIELD 8). In addition to these constant fields, the agency must provide fields 9 and 10 to their depositors and the depositor must provide field 5 to the sending financial institution.

The depositor should inform the financial institution that sends the funds transfers to Treasury to use due care and ensure that all information is provided in the prescribed format. Failure to provide the information in the prescribed format may cause a delay in the notification of the funds transfer to the agency.

A sample of a funds transfer deposit message to Treasury is included within this appendix.

021030004 (2)

(3) (4) (5)

(6)

/ (7) (8)

**TREAS**

NYC/CTR/ (9)

BNF-/AC-nnnnnnnn

OBI- (10)

ESCROW REGISTER  
REINSURED COMPANY NAME  
ESCROW ACCOUNT #99999  
01/01/XXXX HH:MM

Total Requested Amount	21,000.00
Previous Requested Amount	.00
Receivable Amount	.00
Payment Amount	21,000.00

State	Policy Issuing Company	Policy Number	Name	Claim Number	Requested Amount	Previous Amount	Payable Amount
02	500	123456	Producer 1	1111	1,000.00	0.00	1,000.00
02	500	234567	Producer 2	2222	2,000.00	0.00	2,000.00
02	500	345678	Producer 3	3333	3,000.00	0.00	3,000.00
02	500	456789	Producer 4	4444	4,000.00	0.00	4,000.00
02	500	678901	Producer 5	5555	5,000.00	0.00	5,000.00

Previous Y-T-D YYYY Total	74,000.00
Reinsurance Year YYYY Total	15,000.00
<b>Cumulative Y-T-D Total</b>	<b>89,000.00</b>

02	500	456789	Producer 6	6666	6,000.00	0.00	6,000.00
----	-----	--------	------------	------	----------	------	----------

Previous Y-T-D YYYY(+1) Total	10,000.00
Reinsurance Year YYYY(+1) Total	6,000.00
<b>Cumulative Y-T-D Total</b>	<b>16,000.00</b>

ESCROW REGISTER  
REINSURED COMPANY NAME  
ESCROW ACCOUNT #99999  
MM/DD/YYYY HH:MM

Total Requested Amount	21,000.00
Previous Requested Amount	.00
Receivable Amount	.00
Payment Amount	21,000.00

---

Previous Y-T-D Total	74,000.00
Reinsurance Year YYYY Total	15,000.00
<b>Cumulative Y-T-D Total</b>	<b>89,000.00</b>

---

Previous Y-T-D Total	10,000.00
Reinsurance Year YYYY(+1)Total	6,000.00
Cumulative Y-T-D Total	16,000.00

RO XX  
Reinsurance Company Name  
C/O MGA

FCIC LIVESTOCK OPERATIONS REPORT  
REINSURANCE YEAR - YYYY  
MONTHLY

PAGE: 1  
LRCP001-C

CURRENT DATE: MM/DD/YYYY HH.MM.SS CUTOFF DATE: MM/DD/YYYY

	PREMIUM	SUBSIDY	LOSSES
LIVESTOCK	9,999,999	999,999	999,999

	DUE COMPANY	DUE FCIC
NET A & O SUBSIDY (99.9%)	999,999.99	
COMPANY PREVIOUS PAYMENT	999,999.99	
FCIC INTEREST PAID	999,999.99	
ADJUSTMENTS DUE COMPANY	999,999.99	
FCIC PREVIOUS PAYMENT		999,999.99
FCIC INTEREST /PENALTY		999,999.99
ADJUSTMENTS DUE FCIC		999,999.99
LIVESTOCK SETTLEMENT	999,999.99	999,999.99
SUBTOTAL	999,999.99	999,999.99
BALANCE DUE COMPANY/FCIC	999,999.99	999,999.99

CERTIFIED CORRECT

_____ NAME	_____ TITLE	_____ DATE
---------------	----------------	---------------

NOTE: ANY FALSE CERTIFICATION MADE TO THE CORPORATION MAY SUBJECT THE MAKER TO CRIMINAL AND CIVIL PENALTIES AS PROVIDED

IN 18 U.S.C. 287,1001; 31 U.S.C. 3729 AND 3730

RO XX  
 Reinsurance Company Name  
 C/O MGA.

FCIC LIVESTOCK DETAIL REPORT  
 REINSURANCE YEAR - YYYY  
 MONTHLY

PAGE:1  
 LADR001

CURRENT DATE: MM/DD/YYYY HH.MM.SS CUTOFF DATE: MM/DD/YYYY

CROP					PREMIUM	SUBSIDY	LOSSES
ST	CO	POLICY	YR	NAME			
XX	999	999999	YYYY	DOE, J	6,613	3,637	0
XX	999	999999	YYYY	DOE, JO	13,092	7,725	0
XX	999	999999	YYYY	DOE, JON	3,394	2,002	0
XX	999	999999	YYYY	DOE, JOHN	8,626	5,089	0
XX	999	999999	YYYY	DOE, JESS	1,008	554	0
XX	999	999999	YYYY	DOE, SALLY	4,270	2,518	0
XX	999	999999	YYYY	DOE, JAN	1,762	1,040	0
XX	999	999999	YYYY	DOE, JANE	3,304	1,949	0
XX	999	999999	YYYY	DOE, JODY	2,664	1,572	0
XX	999	999999	YYYY	DOE, RICH	2,121	1,251	0
XX	999	999999	YYYY	DOE, JACK	707	417	0
XX	999	999999	YYYY	DOE, BOB	8,354	4,930	0
TOTAL					55,915	32,684	0

RO XX	LIVESTOCK SETTLEMENT REPORT				PAGE	1
Reinsurance Company Name	REINSURANCE YEAR YYYY				LIVPRT01	
C/O MGA						
CURRENT DATE: MM/DD/YYYY HH.MM.SS		CUTOFF DATE: MM/DD/YYYY				

  

FUND	TOTAL PREMIUM	PRODUCER PREMIUM	SUBSIDY	LOSSES	LOSS RATIO	GAIN LOSS
COMMERCIAL LRP	9,999,999	9,999,999	999,999	999,999	41.1	
COMMERCIAL LGM					.0	
PRIVATE MARKET LRP					.0	
PRIVATE MARKET LGM					.0	
*****						
NET BOOK TOTALS	9,999,999	9,999,999	999,999	999,999	41.1	
COMMERCIAL	9,999,999	9,999,999	999,999	999,999	41.1	
PRIVATE MARKET					.0	
*****						
RETAINED TOTALS	9,999,999	9,999,999	999,999	999,999	41.1	
COMMERCIAL	9,999,999	9,999,999	999,999	999,999	41.1	
PRIVATE MARKET					.0	
*****						
COMPANY SHARE AFTER STOP LOSS	9,999,999	9,999,999	999,999	999,999	41.1	999,999
COMMERCIAL	9,999,999	9,999,999	999,999	999,999	41.1	
PRIVATE MARKET					.0	
*****						
FCIC SHARE	9,999,999	9,999,999	999,999	999,999	41.1	
	DUE COMPANY	DUE FCIC				
SUBSIDY	999,999					
LOSSES DUE FROM FCIC	999					
PREMIUM DUE FCIC		9,999				
REINSURANCE PREMIUM DUE FCIC		99,999				
*****						
SUBTOTAL	999,999	99,999				
*****						
LIVESTOCK ADJUSTMENT	999,999					

### **Weekly Transaction Cut-off Dates**

July 2, 2010	January 7, 2011 – <b>Accounting Cutoff</b>
July 9, 2010 – <b>Accounting Cutoff</b>	January 14, 2011
July 16, 2010	January 21, 2011
July 23, 2010	January 28, 2011
July 30, 2010	February 4, 2011
August 6, 2010 – <b>Accounting Cutoff</b>	February 11, 2011 – <b>Accounting Cutoff</b>
August 13, 2010	February 18, 2011
August 20, 2010	February 25, 2011
August 27, 2010	March 4, 2011
September 3, 2010	March 11, 2011 – <b>Accounting Cutoff</b>
September 10, 2010 – <b>Accounting Cutoff</b>	March 18, 2011
September 17, 2010	March 25, 2011
September 24, 2010	April 1, 2011
October 1, 2010	April 8, 2011 – <b>Accounting Cutoff</b>
October 8, 2010 – <b>Accounting Cutoff</b>	April 15, 2011
October 15, 2010	April 22, 2011
October 22, 2010	April 29, 2011
October 29, 2010	May 6, 2011 – <b>Accounting Cutoff</b>
November 5, 2010	May 13, 2011
November 12, 2010 – <b>Accounting Cutoff</b>	May 20, 2011
November 19, 2010	May 27, 2011
November 26, 2010	June 3, 2011
December 3, 2010	June 10, 2011 – <b>Accounting Cutoff</b>
December 10, 2010 – <b>Accounting Cutoff</b>	June 17, 2011
December 17, 2010	June 24, 2011
December 24, 2010	
December 31, 2010	



### Fund Cutoff and LRR Dates

<b>Sales Closing Date</b>	<b>Mod Sales Closing Date</b>	<b>Week Day</b>	<b>Fund Cutoff LRR 1%</b>	<b>Week Day</b>	<b>Fund Cutoff LRR 3%</b>	<b>Week Day</b>	<b>Fund Cutoff LRR 6%</b>
7/1/2010		Saturday	7/30/2010	Monday	9/3/2010	Wednesday	10/1/2010
7/31/2010	8/2/2010	Wednesday	9/3/2010	Friday	10/1/2010	Sunday	11/5/2010
8/15/2010	8/16/2010	Wednesday	9/17/2010	Friday	10/15/2010	Sunday	11/19/2010
8/31/2010		Thursday	10/1/2010	Saturday	10/29/2010	Monday	12/3/2010
9/30/2010		Saturday	10/29/2010	Monday	12/3/2010	Wednesday	12/31/2010
10/31/2010	11/1/2010	Wednesday	12/3/2010	Friday	12/31/2010	Sunday	2/4/2011
11/20/2010	11/22/2010	Wednesday	12/24/2010	Friday	1/21/2011	Sunday	2/25/2011
11/30/2010		Thursday	12/31/2010	Saturday	1/28/2011	Monday	3/4/2011
12/31/2010		Sunday	2/4/2011	Tuesday	3/4/2011	Thursday	4/1/2011
1/31/2011		Wednesday	3/4/2011	Friday	4/1/2011	Sunday	5/6/2011
2/1/2011		Thursday	3/4/2011	Saturday	4/1/2011	Monday	5/6/2011
2/15/2011		Thursday	3/18/2011	Saturday	4/15/2011	Monday	5/20/2011
2/28/2011		Wednesday	4/1/2011	Friday	4/29/2011	Sunday	6/3/2011
3/15/2011		Thursday	4/15/2011	Saturday	5/13/2011	Monday	6/17/2011
3/31/2011		Saturday	4/29/2011	Monday	6/3/2011	Wednesday	7/1/2011
5/1/2011	5/2/2011	Wednesday	6/3/2011	Friday	7/1/2011	Sunday	8/5/2011
5/31/2011		Thursday	7/1/2011	Saturday	7/29/2011	Monday	9/2/2011
7/1/2011		Sunday	8/5/2011	Tuesday	9/2/2011	Thursday	9/30/2011
7/31/2011	8/1/2011	Wednesday	9/2/2011	Friday	9/30/2011	Sunday	11/4/2011

## Acronyms

---

A&O	Administrative & Operating Expense
ACT	The Federal Crop Insurance Act (7 U.S.C. 1502 et seq.)
ADM	Actuarial Data Master
AFS	Actuarial Filing System
AGR	Adjusted Gross Revenue (Whole-farm coverage based on producer's Schedule F)
AGR-L	Adjusted Gross Revenue-Lite (Whole-farm coverage based on producer's Schedule F using less commodities to qualify)
AIP	Approved Insurance Provider
APDD	Actuarial & Product Design Division
APH	Actual Production History (producers records for developing coverage)
ARD	Acreage Reporting Date
ARPA	Agricultural Risk Protection Act (also known as the Crop Insurance Act of 2000)
CAT	Catastrophic Risk Protection
CEO	Coverage Enhancement Option
CIH	Crop Insurance Handbook
CIMS	Comprehensive Information Management System
CLU	Common Land Unit
CO	RMA Compliance Office
COB	Close of Business
CY	Crop Year
DQS	Data Quality Section
DY	Determined Yields
eDAS	Electronic Data Acceptance System
EFT	Electronic Funds Transfer
FAOB	Financial & Accounting Operations Branch
FCIC	Federal Crop Insurance Corporation (RMA)
FIPS	Federal Information Processing Standards
FSA	Farm Service Agency
FY	Fiscal Year (i.e., Oct. 1, 2010 to Sep 30, 2011 is the 2011 fiscal year)
GRP	Group Risk Plan
IRM	Information Resources Management
IS	Insurance Services
ITS	Ineligible Tracking System
KCO	RMA Kansas City Office
LAC	Loss Adjustment Contractor
LAM	Loss Adjustment Manual
LAN	Local Area Network
LFA	Late Filed Acreage Reduction
LGM	Livestock Gross Margin
LRP	Livestock Risk Protection
LRR	Late Reporting Reduction
MGA	Managing General Agency
MPCI	Multiple Peril Crop Insurance
MY	Master Yields
NAD	National Appeals Division
NASS	National Agricultural Statistics Service
NCIS	National Crop Insurance Services

PAAD	Product Analysis and Accounting Division
PASD	Product Administration and Standards Division
PASS	Policy Acceptance and Storage System
PHTS	Policyholder Tracking System
PIC	Policy Issuing Company
PM	Product Management
PRD	Production Reporting Data
PSR	PASS Status Report
RAS	Reinsurance Accounting System
RMA	Risk management Agency
RME	Risk Management Education
RSD	Reinsurance Services Division
RO	RMA Regional Office
RY	Reinsurance Year
SBI	Substantial Beneficial Interest
SBOB	Summary Book of Business
SCD	Sales Closing Date
SF	Standard Form (prefix to form numbers)
SPOI	Special Provisions of Insurance
SRA	Standard Reinsurance Agreement
T-Yield	Transitional Yield
UCM	Underwriting Capacity Manager
USDA	United States Department of Agriculture
WA	Written Agreement
WDC	RMA Washington, DC
WUA	Written Unit Agreement
XML	Extensible Markup Language